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(54) Title: SMAC PEPTIDOMIMETICS AND THE USES THEREOF

(57) Abstract: The invention relates to peptidomimetics of Smac which function as inhibitors of Inhibitor of Apoptosis Proteins. The invention also relates to the use of these peptidomimetics for inducing apoptotic cell death and for sensitizing cells to inducers of apoptosis.

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SMAC PEPTIDOMIMETICS AND THE USES THEREOF

BACKGROUND OF THE INVENTION

Field of the Invention

[0001] This invention is in the field of medicinal chemistry. In particular, the invention relates to peptidomimetics of Smac which function as inhibitors of Inhibitor of Apoptosis Proteins. The invention also relates to the use of these mimetics for inducing apoptosis in cells and for sensitizing cells to the induction of apoptotic cell death.

Related Art

[0002] The aggressive cancer cell phenotype is the result of a variety of genetic and epigenetic alterations leading to deregulation of intracellular signaling pathways (Ponder, *Nature 411*:336 (2001)). The commonality for all cancer cells, however, is their failure to execute an apoptotic program, and lack of appropriate apoptosis due to defects in the normal apoptosis machinery is a hallmark of cancer (Lowe *et al.*, *Carcinogenesis 21*:485 (2000)). Most of the current cancer therapies, including chemotherapeutic agents, radiation, and immunotherapy, work by indirectly inducing apoptosis in cancer cells. The inability of cancer cells to execute an apoptotic program due to defects in the normal apoptotic machinery is thus often associated with an increase in resistance to chemotherapy, radiation, or immunotherapy-induced apoptosis. Primary or acquired resistance of human cancer of different origins to current treatment protocols due to apoptosis defects is a major problem in current cancer therapy (Lowe *et al.*, *Carcinogenesis 21*:485 (2000); Nicholson, N*ature 407*:810 (2000)). Accordingly, current and future efforts towards designing and developing new molecular target-specific anticancer therapies to improve survival and quality of life of cancer patients must include strategies that specifically target cancer cell resistance to apoptosis. In this regard, targeting

crucial negative regulators that play a central role in directly inhibiting apoptosis in cancer cells represents a highly promising therapeutic strategy for new anticancer drug design.

[0003] Two classes of central negative regulators of apoptosis have been identified. The first class of regulators is the Bcl-2 family of proteins, as exemplified by two potent anti-apoptotic molecules, Bcl-2 and Bcl-X_L proteins (Adams *et al.*, *Science 281*:1322 (1998); Reed, *Adv. Pharmacol. 41*:501 (1997); Reed *et al.*, *J. Cell. Biochem. 60*:23 (1996)). Therapeutic strategies for targeting Bcl-2 and Bcl-X_L in cancer to restore cancer cell sensitivity and overcome resistance of cancer cells to apoptosis have been extensively reviewed (Adams *et al.*, *Science 281*:1322 (1998); Reed, *Adv. Pharmacol. 41*:501 (1997); Reed *et al.*, *J. Cell. Biochem. 60*:23 (1996)). Currently, Bcl-2 antisense therapy is in several Phase III clinical trials for the treatment of solid and non-solid tumors. Several laboratories are interested in designing small molecule inhibitors of Bcl-2 and Bcl-X_L.

[0004] The second class of central negative regulators of apoptosis is the inhibitor of apoptosis proteins (IAPs) (Deveraux *et al.*, *Genes Dev. 13*:239 (1999); Salvesen *et al.*, *Nat. Rev. Mol. Cell. Biol. 3*:401 (2002)). IAP proteins potently suppress apoptosis induced by a large variety of apoptotic stimuli, including chemotherapeutic agents, radiation, and immunotherapy in cancer cells.

[0005] X-linked IAP (XIAP) is the most potent inhibitor in suppressing apoptosis among all of the IAP members (Holcik *et al.*, *Apoptosis 6*:253 (2001); LaCasse *et al.*, *Oncogene 17*:3247 (1998); Takahashi *et al.*, *J. Biol. Chem. 273*:7787 (1998); Deveraux *et al.*, *Nature 388*:300 (1997); Sun *et al.*, *Nature 401*:818 (1999); Deveraux *et al.*, *EMBO J. 18*:5242 (1999); Asselin *et al.*, *Cancer Res. 61*:1862 (2001)). XIAP plays a key role in the negative regulation of apoptosis in both the death receptor-mediated and the mitochondria-mediated pathways. XIAP functions as a potent endogenous apoptosis inhibitor by directly binding and potently inhibiting three members of the caspase family of enzymes, caspase-3, -7, and -9 (Takahashi *et al.*, *J.*

Biol. Chem. 273:7787 (1998); Deveraux *et al.*, *Nature 388*:300 (1997); Sun *et al.*, *Nature 401*:818 (1999); Deveraux *et al.*, *EMBO J. 18*:5242 (1999); Asselin *et al.*, *Cancer Res. 61*:1862 (2001); Riedl *et al.*, *Cell 104*:791 (2001); Chai *et al.*, *Cell 104*:769 (2001); Huang *et al.*, *Cell 104*:781 (2001)). XIAP contains three baculovirus inhibitor of apoptosis repeat (BIR) domains as well as a C-terminal RING finger. The third BIR domain (BIR3) selectively targets caspase-9, the initiator caspase in the mitochondrial pathway, whereas the linker region between BIR1 and BIR2 inhibits both caspase-3 and caspase-7 (Salvesen *et al.*, *Nat. Rev. Mol. Cell. Biol. 3*:401 (2002)). While binding to XIAP prevents the activation of all three caspases, it is apparent that the interaction with caspase-9 is the most critical for its inhibition of apoptosis (Ekert *et al.*, *J. Cell Biol. 152*:483 (2001); Srinivasula *et al.*, *Nature 410*:112 (2001)). Because XIAP blocks apoptosis at the down-stream effector phase, a point where multiple signaling pathways converge, strategies targeting XIAP may prove to be especially effective to overcome resistance of cancer cells to apoptosis (Fulda *et al.*, *Nature Med. 8*:808 (2002); Arnt *et al.*, *J. Biol. Chem. 277*:44236 (2002)).

[0006] Although the precise role of XIAP in each type of cancer is far from completely understood, evidence is mounting to indicate that XIAP is widely overexpressed in many types of cancer and may play an important role in the resistance of cancer cells to a variety of current therapeutic agents (Holcik *et al.*, *Apoptosis 6*:253 (2001); LaCasse *et al.*, *Oncogene 17*:3247 (1998)).

[0007] XIAP protein was found to be expressed in most of the NCI 60 human cancer cell lines (Tamm *et al.*, *Clin. Cancer Res. 6*:1796 (2000)). Analysis of tumor samples in 78 previously untreated patients showed that those with lower levels of XIAP had significantly longer survival (Tamm *et al.*, *Clin. Cancer Res. 6*:1796 (2000)). XIAP was found to be expressed in human malignant glioma (Wagenknecht *et al.*, *Cell Death Differ. 6*:370 (1999); Fulda *et al.*, *Nature Med. 8*:808 (2002)). XIAP was found to be expressed in human prostate cancer cells and blocks Apo2 ligand/tumor necrosis factor-related apoptosis inducing ligand-mediated apoptosis of prostate cancer cells in the

presence of mitochondrial activation (McEleny *et al.*, *Prostate 51*:133 (2002); Ng *et al.*, *Mol. Cancer Ther. 1*:1051 (2002)). XIAP is overexpressed in non-small cell lung cancer (NSCLC) in patients and has been implicated in pathogenesis of NSCLC (Hofmann *et al.*, *J. Cancer Res. Clin. Oncol. 128*:554 (2002)). Expression of XIAP and lack of down-regulation of XIAP upon treatment with cisplatin have been implicated in cisplatin resistance of human ovarian cancer (Li *et al.*, *Endocrinology 142*:370 (2001); Cheng *et al.*, *Drug Resist. Update 5*:131 (2002)). Taken together, these data suggest that XIAP may play an important role in resistance of several human cancers to current therapeutic agents.

[0008] Recently, Smac/DIABLO (second mitochondria-derived activator of caspases) was identified as a protein released from mitochondria into the cytosol in response to apoptotic stimuli (Budihardjo *et al.*, *Annu. Rev. Cell Dev. Biol. 15*:269 (1999); Du *et al.*, *Cell 102*:33 (2000)). Smac is synthesized with an N-terminal mitochondrial targeting sequence that is proteolytically removed during maturation to the mature polypeptide. Smac was shown to directly interact with XIAP and other IAPs and to disrupt their binding to caspases and facilitate caspase activation. Smac is a potent endogenous inhibitor of XIAP.

[0009] High resolution, experimental three-dimensional (3D) structures of the BIR3 domain of XIAP in complex with Smac protein and peptide have recently been determined (Sun *et al.*, *J. Biol. Chem. 275*:36152 (2000); Wu *et al.*, *Nature 408*:1008 (2000)) (Figure 1). The N-terminal tetrapeptide of Smac (Ala-Val-Pro-Ile, or AVPI (SEQ ID NO:1)) recognizes a surface groove on the BIR3 domain of XIAP through several hydrogen-bonding interactions and van der Waals contacts. The interaction between BIR3 and caspase-9 has also been shown to involve four residues (Ala-Thr-Pro-Phe, ATPF (SEQ ID NO:2)) on the amino terminus of the small subunit of caspase-9 to the same surface groove on the BIR3 domain. Several recent studies have convincingly demonstrated that Smac promotes the catalytic activity of caspase-9 by competing with caspase-9 for the same binding groove on the surface of the

BIR3 domain (Ekert *et al.*, *J. Cell Biol. 152*:483 (2001); Srinivasula *et al.*, *Nature 410*:112 (2001)).

[0010] Unlike most protein-protein interactions, the Smac-XIAP interaction is mediated by only four amino acid residues on the Smac protein and a well-defined surface groove on the BIR3 domain of XIAP. The K_d value of Smac peptide AVPI (SEQ ID NO:1) to XIAP (K_d = 0.4 μM) is essentially the same as the mature Smac protein (K_d = 0.42 μM). This well-defined interaction site is ideal for the design of non-peptide, drug-like small molecules that mimic the binding of Smac to XIAP.

[0011] A cell permeable Smac peptide, which consists of the first four amino acid residues (AVPI (SEQ ID NO:1)) of the N-terminus of Smac tethered to a carrier peptide to facilitate intracellular delivery, was recently shown to sensitize various tumor cells *in vitro* and malignant glioma cells *in vivo* to apoptosis induced by death receptor ligation or cytotoxic drugs (Fulda *et al.*, *Nature Med. 8*:808 (2002)). Importantly, this Smac peptide strongly enhanced the anti-tumor activity of Apo2L/TRAIL in an intracranial malignant glioma xenograft model *in vivo*. Complete eradication of established tumors and survival of mice was only achieved upon combined treatment with Smac peptides and Apo2L/TRAIL. Of significance, Smac peptide does not have detectable toxicity to normal brain tissue.

[0012] A second recent independent study also showed that peptides consisting of the first four to eight amino acid residues of the N-terminus of Smac tethered to a different carrier peptide enhanced the induction of apoptosis and the long term anti-proliferative effects of diverse chemotherapeutic drugs, including paclitaxel, etoposide, SN-38, and doxorubicin in MCF-7 and other human breast cancer cell lines (Arnt *et al.*, *J. Biol. Chem. 277*:44236 (2002)). This study conclusively showed that XIAP and cIAP-1 are the primary molecular targets for these peptides in cells.

[0013] A third study showed that a Smac peptide of the first seven N-terminal residues tethered to polyarginine restored the apoptosome activity and reversed the apoptosis resistance in non-small cell lung cancer H460 cells

(Yang *et al.*, *Cancer Res. 63*:831 (2003)). XIAP was shown to be responsible for the defect in apoptosome activity and suppression of caspase activity in H460 cells. When used in combination with chemotherapy, the cell-permeable Smac peptide regressed the tumor growth *in vivo* with little toxicity to the mice. Taken together, these recent independent studies strongly suggest that a potent, stable, cell-permeable Smac peptidomimetic may have great therapeutic potential for the treatment of human breast cancer and other types of cancer.

[0014] Peptide-based inhibitors are useful tools to elucidate the anti-apoptotic function of IAPs and the role of IAPs in response of cancer cells to chemotherapeutic agents. But peptide-based inhibitors in general have intrinsic limitations as potentially useful therapeutic agents. These limitations include their poor cell-permeability and poor *in vivo* stability. Indeed, in these three published studies using Smac-based peptide inhibitors, the peptides had to be fused to carrier peptides to make them relatively cell-permeable.

[0015] The present invention involves the design of peptidomimetics based upon Smac peptide and the high resolution experimental three dimensional structures of Smac in complex with XIAP BIR3 domain.

SUMMARY OF THE INVENTION

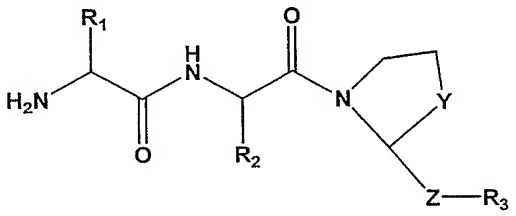
[0016] It is generally accepted that the inability of cancer cells or their supporting cells to undergo apoptosis in response to genetic lesions or exposure to inducers of apoptosis (such as anticancer agents and radiation) is a major factor in the onset and progression of cancer. The induction of apoptosis in cancer cells or their supporting cells (*e.g.*, neovascular cells in the tumor vasculature) is thought to be a universal mechanism of action for virtually all of the effective cancer therapeutic drugs or radiation therapies on the market or in practice today. One reason for the inability of a cell to undergo apoptosis is increased expression and accumulation of IAPs.

[0017] The present invention contemplates that exposure of animals suffering from cancer to therapeutically effective amounts of drug(s) (*e.g.*, small molecules) that inhibit the function(s) of IAPs will kill cancer cells or supporting cells outright (those cells whose continued survival is dependent on the overactivity of IAPs) and/or render such cells as a population more susceptible to the cell death-inducing activity of cancer therapeutic drugs or radiation therapies. The present invention contemplates that inhibitors of IAPs satisfy an unmet need for the treatment of multiple cancer types, either when administered as monotherapy to induce apoptosis in cancer cells dependent on IAP function, or when administered in a temporal relationship with other cell death-inducing cancer therapeutic drugs or radiation therapies so as to render a greater proportion of the cancer cells or supportive cells susceptible to executing the apoptosis program compared to the corresponding proportion of cells in an animal treated only with the cancer therapeutic drug or radiation therapy alone.

[0018] In certain embodiments of the invention, combination treatment of animals with a therapeutically effective amount of a compound of the present invention and a course of an anticancer agent or radiation produces a greater tumor response and clinical benefit in such animals compared to those treated with the compound or anticancer drugs/radiation alone. Put another way, because the compounds lower the apoptotic threshold of all cells that express IAPs, the proportion of cells that successfully execute the apoptosis program in response to the apoptosis inducing activity of anticancer drugs/radiation is increased. Alternatively, the compounds of the present invention can be used to allow administration of a lower, and therefore less toxic and more tolerable, dose of an anticancer agent and/or radiation to produce the same tumor response/clinical benefit as the conventional dose of the anticancer agent/radiation alone. Since the doses for all approved anticancer drugs and radiation treatments are known, the present invention contemplates the various combinations of them with the present compounds. Also, since the compounds of the present invention act at least in part by inhibiting IAPs, the

exposure of cancer cells and supporting cells to therapeutically effective amounts of the compounds can be temporally linked to coincide with the attempts of cells to execute the apoptosis program in response to the anticancer agent or radiation therapy. Thus, in some embodiments, administering the compositions of the present invention in connection with certain temporal relationships, provides especially efficacious therapeutic practices.

[0019] The present invention relates to Smac peptidomimetics that are useful for inhibiting the activity of IAP proteins, inducing apoptosis in cells, and increasing the sensitivity of cells to inducers of apoptosis. In one particular embodiment, the Smac peptidomimetics are compounds of formula I:



I

[0020] or a pharmaceutically acceptable salt or prodrug thereof, wherein:

[0021] R_1 is C_{1-2} alkyl or C_{1-2} haloalkyl;

[0022] R_2 is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl;

[0023] R_3 is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl;

[0024] Y is $(CH_2)_{0-3}$, wherein one or more carbon can be replaced by one or more heteroatoms selected from oxygen, sulfur, and nitrogen, and one or more hydrogens in CH_2 groups can be replaced by a branched or unbranched alkyl or cyclic alkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl; and

[0025] Z is CONH, CH_2O, NHCO, $(CH_2)_{1-4}$, $(CH_2)_{1-3}CONH(CH_2)_{0-3}$, $(CH_2)_{1-3}S(CH_2)_{0-3}$, $(CH_2)_{1-3}NH(CH_2)_{0-3}$, $(CH_2)_{1-3}NHCO(CH_2)_{0-3}$, $(CH_2)_{1-3}NHSO_2(CH_2)_{0-3}$, $(CH_2)_{1-3}NHC(O)NH(CH_2)_{0-3}$,

$(CH_2)_{1-3}NHC(S)NH(CH_2)_{0-3}$, or $(CH_2)_{1-3}NR'(CH_2)_{0-3}$, wherein R' is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl.

[0026] The invention relates to compounds represented by Formula I, which are inhibitors of IAP proteins. The invention relates to the use if the compounds of the invention to induce apoptosis in cells. The invention also relates to the use of the compounds of the invention for sensitizing cells to inducers of apoptosis. The compounds are useful for the treatment, amelioration, or prevention of disorders responsive to induction of apoptotic cell death, *e.g.*, disorders characterized by dysregulation of apoptosis, including hyperproliferative diseases such as cancer. In certain embodiments, the compounds can be used to treat, ameliorate, or prevent cancer that is characterized by resistance to cancer therapies (*e.g.*, those which are chemoresistant, radiation resistant, hormone resistant, and the like). In other embodiments, the compounds can be used to treat hyperproliferative diseases characterized by overexpression of IAPs.

[0027] The present invention provides pharmaceutical compositions comprising a compound of Formula I in a therapeutically effective amount to induce apoptosis in cells or to sensitize cells to inducers of apoptosis.

[0028] The invention further provides kits comprising a compound of Formula I and instructions for administering the compound to an animal. The kits may optionally contain other therapeutic agents, *e.g.*, anticancer agents.

[0029] The invention also provides methods of making compounds of Formula I.

BRIEF DESCRIPTION OF THE DRAWINGS/FIGURES

[0030] Figure 1 shows the modeled complex of Smac peptide with XIAP BIR3.

[0031] Figure 2 shows saturation binding curves for the FP-based assay.

[0032] Figure 3 shows the binding of peptides in the FP-based assay.

[0033] Figure 4 shows the modeled complex of compound 1 and XIAP BIR3.

[0034] Figure 5 shows Western blot analysis of XIAP, cIAP-1/2, survivin, and Smac in various cell lines.

[0035] Figures 6A and 6B show the induction of apoptosis in PC-3 cells in response to CDDP and Smac peptidomimetics.

[0036] Figure 7 shows the induction of apoptosis in PC-3 cells in response to CDDP and Smac peptidomimetics.

[0037] Figure 8 shows the induction of apoptosis in MDA-231 cells in response to CDDP and Smac peptidomimetics.

[0038] Figure 9 shows the inhibition of colony growth in response to radiation and Smac peptidomimetics.

[0039] Figure 10 shows the induction of apoptosis in MDA-231 cells in response to Smac peptidomimetics.

[0040] Figure 11 shows the induction of apoptosis in PC-3 cells in response to Smac peptidomimetics.

DETAILED DESCRIPTION OF THE INVENTION

[0041] The present invention relates to compounds represented by Formula I, which are peptidomimetics of Smac and function as inhibitors of IAPs. By inhibiting IAPs, these compounds sensitize cells to inducers of apoptosis and, in some instances, themselves induce apoptosis. Therefore, the invention relates to methods of sensitizing cells to inducers of apoptosis and to methods of inducing apoptosis in cells, comprising contacting the cells with a compound of Formula I alone or in combination with an inducer of apoptosis. The invention further relates to methods of treating, ameliorating, or preventing disorders in an animal that are responsive to induction of apoptosis comprising administering to the animal a compound of Formula I and an

inducer of apoptosis. Such disorders include those characterized by a dysregulation of apoptosis and those characterized by overexpression of IAPs.

[0042] The term "IAP proteins," as used herein, refers to any known member of the Inhibitor of Apoptosis Protein family, including, but not limited to, XIAP, cIAP-1, cIAP-2, and ML-IAP.

[0043] The term "overexpression of IAPs," as used herein, refers to an elevated level (*e.g.*, aberrant level) of mRNAs encoding for an IAP protein(s), and/or to elevated levels of IAP protein(s) in cells as compared to similar corresponding non-pathological cells expressing basal levels of mRNAs encoding IAP proteins or having basal levels of IAP proteins. Methods for detecting the levels of mRNAs encoding IAP proteins or levels of IAP proteins in a cell include, but are not limited to, Western blotting using IAP protein antibodies, immunohistochemical methods, and methods of nucleic acid amplification or direct RNA detection. As important as the absolute level of IAP proteins in cells is to determining that they overexpress IAP proteins, so also is the relative level of IAP proteins to other pro-apoptotic signaling molecules (*e.g.*, pro-apoptotic Bcl-2 family proteins) within such cells. When the balance of these two are such that, were it not for the levels of the IAP proteins, the pro-apoptotic signaling molecules would be sufficient to cause the cells to execute the apoptosis program and die, said cells would be dependent on the IAP proteins for their survival. In such cells, exposure to an inhibiting effective amount of an IAP protein inhibitor will be sufficient to cause the cells to execute the apoptosis program and die. Thus, the term "overexpression of an IAP protein" also refers to cells that, due to the relative levels of pro-apoptotic signals and anti-apoptotic signals, undergo apoptosis in response to inhibiting effective amounts of compounds that inhibit the function of IAP proteins.

[0044] The terms "anticancer agent" and "anticancer drug," as used herein, refer to any therapeutic agents (*e.g.*, chemotherapeutic compounds and/or molecular therapeutic compounds), radiation therapies, or surgical

interventions, used in the treatment of hyperproliferative diseases such as cancer (*e.g.*, in mammals).

[0045] The term "prodrug," as used herein, refers to a pharmacologically inactive derivative of a parent "drug" molecule that requires biotransformation (*e.g.*, either spontaneous or enzymatic) within the target physiological system to release, or to convert (*e.g.*, enzymatically, mechanically, electromagnetically) the prodrug into the active drug. Prodrugs are designed to overcome problems associated with stability, toxicity, lack of specificity, or limited bioavailability. Exemplary prodrugs comprise an active drug molecule itself and a chemical masking group (*e.g.*, a group that reversibly suppresses the activity of the drug). Some preferred prodrugs are variations or derivatives of compounds that have groups cleavable under metabolic conditions. Exemplary prodrugs become pharmaceutically active *in vivo* or *in vitro* when they undergo solvolysis under physiological conditions or undergo enzymatic degradation or other biochemical transformation (*e.g.*, phosphorylation, hydrogenation, dehydrogenation, glycosylation). Prodrugs often offer advantages of solubility, tissue compatibility, or delayed release in the mammalian organism. (*See e.g.*, Bundgard, Design of Prodrugs, *pp.* 7-9, 21-24, Elsevier, Amsterdam (1985); and Silverman, The Organic Chemistry of Drug Design and Drug Action, *pp.* 352-401, Academic Press, San Diego, CA (1992)). Common prodrugs include acid derivatives such as esters prepared by reaction of parent acids with a suitable alcohol (*e.g.*, a lower alkanol), amides prepared by reaction of the parent acid compound with an amine, or basic groups reacted to form an acylated base derivative (*e.g.*, a lower alkylamide).

[0046] The term "pharmaceutically acceptable salt," as used herein, refers to any salt (*e.g.*, obtained by reaction with an acid or a base) of a compound of the present invention that is physiologically tolerated in the target animal (*e.g.*, a mammal). Salts of the compounds of the present invention may be derived from inorganic or organic acids and bases. Examples of acids include, but are not limited to, hydrochloric, hydrobromic, sulfuric, nitric, perchloric, fumaric,

maleic, phosphoric, glycolic, lactic, salicylic, succinic, toluene-p-sulfonic, tartaric, acetic, citric, methanesulfonic, ethanesulfonic, formic, benzoic, malonic, sulfonic, naphthalene-2-sulfonic, benzenesulfonic acid, and the like. Other acids, such as oxalic, while not in themselves pharmaceutically acceptable, may be employed in the preparation of salts useful as intermediates in obtaining the compounds of the invention and their pharmaceutically acceptable acid addition salts.

[0047] Examples of bases include, but are not limited to, alkali metal (*e.g.*, sodium) hydroxides, alkaline earth metal (*e.g.*, magnesium) hydroxides, ammonia, and compounds of formula NW_4^+, wherein W is C_{1-4} alkyl, and the like.

[0048] Examples of salts include, but are not limited to: acetate, adipate, alginate, aspartate, benzoate, benzenesulfonate, bisulfate, butyrate, citrate, camphorate, camphorsulfonate, cyclopentanepropionate, digluconate, dodecylsulfate, ethanesulfonate, fumarate, flucoheptanoate, glycerophosphate, hemisulfate, heptanoate, hexanoate, chloride, bromide, iodide, 2-hydroxyethanesulfonate, lactate, maleate, methanesulfonate, 2-naphthalenesulfonate, nicotinate, oxalate, palmoate, pectinate, persulfate, phenylpropionate, picrate, pivalate, propionate, succinate, tartrate, thiocyanate, tosylate, undecanoate, and the like. Other examples of salts include anions of the compounds of the present invention compounded with a suitable cation such as Na^+, NH_4^+, and NW_4^+ (wherein W is a C_{1-4} alkyl group), and the like. For therapeutic use, salts of the compounds of the present invention are contemplated as being pharmaceutically acceptable. However, salts of acids and bases that are non-pharmaceutically acceptable may also find use, for example, in the preparation or purification of a pharmaceutically acceptable compound.

[0049] The term "therapeutically effective amount," as used herein, refers to that amount of the therapeutic agent sufficient to result in amelioration of one or more symptoms of a disorder, or prevent advancement of a disorder, or cause regression of the disorder. For example, with respect to the treatment of

cancer, a therapeutically effective amount preferably refers to the amount of a therapeutic agent that decreases the rate of tumor growth, decreases tumor mass, decreases the number of metastases, increases time to tumor progression, or increases survival time by at least 5%, preferably at least 10%, at least 15%, at least 20%, at least 25%, at least 30%, at least 35%, at least 40%, at least 45%, at least 50%, at least 55%, at least 60%, at least 65%, at least 70%, at least 75%, at least 80%, at least 85%, at least 90%, at least 95%, or at least 100%.

[0050] The terms "sensitize" and "sensitizing," as used herein, refer to making, through the administration of a first agent (*e.g.*, a compound of Formula I), an animal or a cell within an animal more susceptible, or more responsive, to the biological effects (*e.g.*, promotion or retardation of an aspect of cellular function including, but not limited to, cell growth, proliferation, invasion, angiogenesis, or apoptosis) of a second agent. The sensitizing effect of a first agent on a target cell can be measured as the difference in the intended biological effect (*e.g.*, promotion or retardation of an aspect of cellular function including, but not limited to, cell growth, proliferation, invasion, angiogenesis, or apoptosis) observed upon the administration of a second agent with and without administration of the first agent. The response of the sensitized cell can be increased by at least 10%, at least 20%, at least 30%, at least 40%, at least 50%, at least 60%, at least 70%, at least 80%, at least 90%, at least 100%, at least 150%, at least 200%, at least 350%, at least 300%, at least 350%, at least 400%, at least 450%, or at least 500% over the response in the absence of the first agent.

[0051] The term "dysregulation of apoptosis," as used herein, refers to any aberration in the ability of (*e.g.*, predisposition) a cell to undergo cell death via apoptosis. Dysregulation of apoptosis is associated with or induced by a variety of conditions, including for example, autoimmune disorders (*e.g.*, systemic lupus erythematosus, rheumatoid arthritis, graft-versus-host disease, myasthenia gravis, or Sjögren's syndrome), chronic inflammatory conditions (*e.g.*, psoriasis, asthma or Crohn's disease), hyperproliferative disorders (*e.g.*,

tumors, B cell lymphomas, or T cell lymphomas), viral infections (*e.g.*, herpes, papilloma, or HIV), and other conditions such as osteoarthritis and atherosclerosis. It should be noted that when the dysregulation is induced by or associated with a viral infection, the viral infection may or may not be detectable at the time dysregulation occurs or is observed. That is, viral-induced dysregulation can occur even after the disappearance of symptoms of viral infection.

[0052] The term "hyperproliferative disease," as used herein, refers to any condition in which a localized population of proliferating cells in an animal is not governed by the usual limitations of normal growth. Examples of hyperproliferative disorders include tumors, neoplasms, lymphomas and the like. A neoplasm is said to be benign if it does not undergo invasion or metastasis and malignant if it does either of these. A "metastatic" cell means that the cell can invade and destroy neighboring body structures. Hyperplasia is a form of cell proliferation involving an increase in cell number in a tissue or organ without significant alteration in structure or function. Metaplasia is a form of controlled cell growth in which one type of fully differentiated cell substitutes for another type of differentiated cell.

[0053] The pathological growth of activated lymphoid cells often results in an autoimmune disorder or a chronic inflammatory condition. As used herein, the term "autoimmune disorder" refers to any condition in which an organism produces antibodies or immune cells which recognize the organism's own molecules, cells or tissues. Non-limiting examples of autoimmune disorders include autoimmune hemolytic anemia, autoimmune hepatitis, Berger's disease or IgA nephropathy, celiac sprue, chronic fatigue syndrome, Crohn's disease, dermatomyositis, fibromyalgia, graft versus host disease, Grave's disease, Hashimoto's thyroiditis, idiopathic thrombocytopenia purpura, lichen planus, multiple sclerosis, myasthenia gravis, psoriasis, rheumatic fever, rheumatic arthritis, scleroderma, Sjögren's syndrome, systemic lupus erythematosus, type 1 diabetes, ulcerative colitis, vitiligo, and the like.

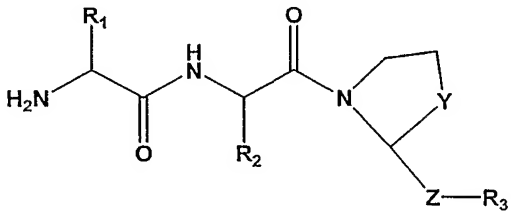
[0054] The term "neoplastic disease," as used herein, refers to any abnormal growth of cells being either benign (non-cancerous) or malignant (cancerous).

[0055] The term "anti-neoplastic agent," as used herein, refers to any compound that retards the proliferation, growth, or spread of a targeted (*e.g.*, malignant) neoplasm.

[0056] The terms "prevent," "preventing," and "prevention," as used herein, refer to a decrease in the occurrence of pathological cells (*e.g.*, hyperproliferative or neoplastic cells) in an animal. The prevention may be complete, *e.g.*, the total absence of pathological cells in a subject. The prevention may also be partial, such that the occurrence of pathological cells in a subject is less than that which would have occurred without the present invention.

[0057] The term "naturally occurring amino acids," as used herein, refers to the 20 naturally occurring L-amino acids, *i.e.*, glycine, alanine, valine, leucine, isoleucine, phenylalanine, tyrosine, tryptophan, lysine, arginine, histidine, aspartate, glutamate, asparagine, glutamine, cysteine, methionine, proline, serine, and threonine.

[0058] The inhibitors of IAPs of the present invention are compounds having the general Formula I:



I

[0059] or a pharmaceutically acceptable salt or prodrug thereof, wherein:

[0060] R_1 is C_{1-2} alkyl or C_{1-2} haloalkyl;

[0061] R_2 is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl;

[0062] R_3 is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl;

[0063] Y is $(CH_2)_{0-3}$, wherein one or more carbon can be replaced by one or more heteroatoms selected from oxygen, sulfur, and nitrogen, and one or more hydrogens in CH_2 groups can be replaced by a branched or unbranched alkyl or cyclic alkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl; and

[0064] Z is CONH, CH_2O, NHCO, $(CH_2)_{1-4}$, $(CH_2)_{1-3}CONH(CH_2)_{0-3}$, $(CH_2)_{1-3}S(CH_2)_{0-3}$, $(CH_2)_{1-3}NH(CH_2)_{0-3}$, $(CH_2)_{1-3}NHCO(CH_2)_{0-3}$, $(CH_2)_{1-3}NHSO_2(CH_2)_{0-3}$, $(CH_2)_{1-3}NHC(O)NH(CH_2)_{0-3}$, $(CH_2)_{1-3}NHC(S)NH(CH_2)_{0-3}$, or $(CH_2)_{1-3}NR'(CH_2)_{0-3}$, wherein R' is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl.

[0065] Useful alkyl groups include straight-chained or branched C_{1-10} alkyl groups, especially methyl, ethyl, propyl, isopropyl, t-butyl, sec-butyl, 3-pentyl, adamantyl, norbornyl, and 3-hexyl groups.

[0066] Useful aryl groups include C_{6-14} aryl, especially phenyl, naphthyl, phenanthrenyl, anthracenyl, indenyl, azulenyl, biphenyl, biphenylenyl, and fluorenyl groups.

[0067] Useful heteroaryl groups include thienyl, benzo[b]thienyl, naphtho[2,3-b]thienyl, thianthrenyl, furyl, pyranyl, isobenzofuranyl, chromenyl, xanthenyl, phenoxanthenyl, 2H-pyrrolyl, pyrrolyl, imidazolyl, pyrazolyl, pyridyl, pyrazinyl, pyrimidinyl, pyridazinyl, indolizinyl, isoindolyl, 3H-indolyl, indolyl, indazolyl, purinyl, 4H-quinolizinyl, isoquinolyl, quinolyl, phthalzinyl, naphthyridinyl, quinozalinyl, cinnolinyl, pteridinyl, carbazolyl, β-carbolinyl, phenanthridinyl, acridinyl, perimidinyl, phenanthrolinyl, phenazinyl, isothiazolyl, phenothiazinyl, isoxazolyl, furazanyl, phenoxazinyl, 1,4-dihydroquinoxaline-2,3-dione, 7-aminoisocoumarin, pyrido[1,2-a]pyrimidin-4-one, 1,2-benzoisoxazol-3-yl, benzimidazolyl, 2-oxindolyl, and 2-oxobenzimidazolyl. Where the heteroaryl group contains a nitrogen atom in a ring, such nitrogen atom may be in the form of an N-oxide, *e.g.*, a pyridyl N-oxide, pyrazinyl N-oxide, pyrimidinyl N-oxide, and the like.

[0068] Optional substituents include one or more alkyl; halo; haloalkyl; cycloalkyl; aryl optionally substituted with one or more lower alkyl, halo, haloakyl or heteroaryl groups; aryloxy optionally substituted with one or more lower alkyl, haloalkyl, or heteroaryl groups; aralkyl, heteroaryl optionally substituted with one or more lower alkyl, haloalkyl, and aryl groups; heteroaryloxy optionally substituted with one or more lower alkyl, haloalkyl, and aryl groups; alkoxy; alkylthio; arylthio; amino; acyloxy; arylacyloxy optionally substituted with one or more lower alkyl, haloalkyl, and aryl groups; diphenylphosphinyloxy optionally substituted with one or more lower alkyl, halo or haloalkyl groups; heterocyclo optionally substituted with one or more lower alkyl, haloalkyl, and aryl groups; heterocycloalkoxy optionally substituted with one or more lower alkyl, haloalkyl, and aryl groups; partially unsaturated heterocycloalkyl optionally substituted with one or more lower alkyl, haloalkyl, and aryl groups; or partially unsaturated heterocycloalkyloxy optionally substituted with one or more lower alkyl, haloalkyl, and aryl groups.

[0069] Useful cycloalkyl groups are C_{3-8} cycloalkyl. Typical cycloalkyl groups include cyclopropyl, cyclobutyl, cyclopentyl, cyclohexyl and cycloheptyl.

[0070] Useful saturated or partially saturated carbocyclic groups are cycloalkyl groups as defined above, as well as cycloalkenyl groups, such as cyclopentenyl, cycloheptenyl and cyclooctenyl.

[0071] Useful halo or halogen groups include fluorine, chlorine, bromine and iodine.

[0072] Useful arylalkyl groups include any of the above-mentioned C_{1-10} alkyl groups substituted by any of the above-mentioned C_{6-14} aryl groups. Useful values include benzyl, phenethyl and naphthylmethyl.

[0073] Useful haloalkyl groups include C_{1-10} alkyl groups substituted by one or more fluorine, chlorine, bromine or iodine atoms, *e.g.*, fluoromethyl, difluoromethyl, trifluoromethyl, pentafluoroethyl, 1,1-difluoroethyl, chloromethyl, chlorofluoromethyl and trichloromethyl groups.

[0074] Useful alkoxy groups include oxygen substituted by one of the C_{1-10} alkyl groups mentioned above.

[0075] Useful alkylthio groups include sulfur substituted by one of the C_{1-10} alkyl groups mentioned above. Also included are the sulfoxides and sulfones of such alkylthio groups.

[0076] Useful amido groups include carbonylamido as well as any C_{1-6} acyl (alkanoyl) attached to an amino nitrogen, *e.g.*, acetamido, propionamido, butanoylamido, pentanoylamido, hexanoylamido as well as aryl-substituted C_{2-6} substituted acyl groups.

[0077] Useful acyloxy groups are any C_{1-6} acyl (alkanoyl) attached to an oxy (--O--) group, *e.g.*, formyloxy, acetoxy, propionoyloxy, butanoyloxy, pentanoyloxy, hexanoyloxy and the like.

[0078] Useful arylacyloxy groups include any of the aryl groups mentioned above substituted on any of the acyloxy groups mentioned above, *e.g.*, 2,6-dichlorobenzoyloxy, 2,6-difluorobenzoyloxy and 2,6-di-(trifluoromethyl)-benzoyloxy groups.

[0079] Useful amino groups include --NH_2, --NHR_{11}, and --$NR_{11}R_{12}$, wherein R_{11} and R_{12} are C_{1-10} alkyl or cycloalkyl groups as defined above.

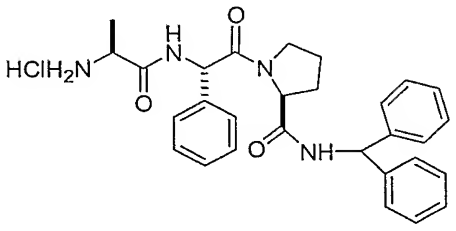
[0080] Useful saturated or partially saturated heterocyclic groups include tetrahydrofuranyl, pyranyl, piperidinyl, piperizinyl, pyrrolidinyl, imidazolidinyl, imidazolinyl, indolinyl, isoindolinyl, quinuclidinyl, morpholinyl, isochromanyl, chromanyl, pyrazolidinyl, pyrazolinyl, tetronoyl and tetramoyl groups.

[0081] Certain of the compounds of the present invention may exist as stereoisomers including optical isomers. The invention includes all stereoisomers and both the racemic mixtures of such stereoisomers as well as the individual enantiomers that may be separated according to methods that are well known to those of skill in the art.

[0082] In certain embodiments, the compounds of Formula 1 do not comprise more than three naturally occurring amino acids, preferably no more than two

naturally occurring amino acids, even more preferably no more than one naturally occurring amino acid.

[0083] In certain embodiments of the invention the compound of Formula I comprises:



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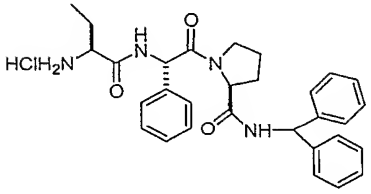

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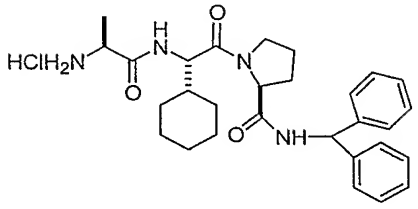

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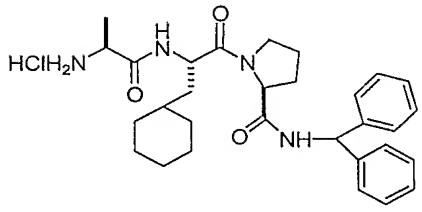

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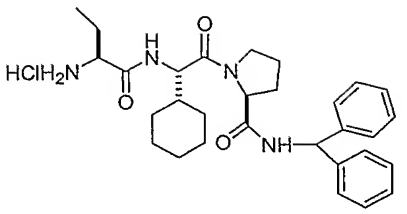
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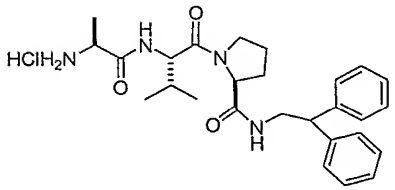
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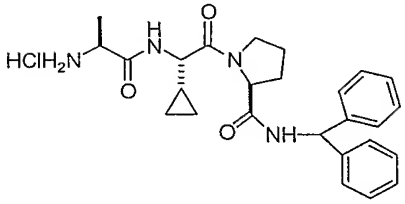
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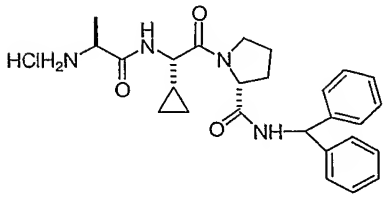
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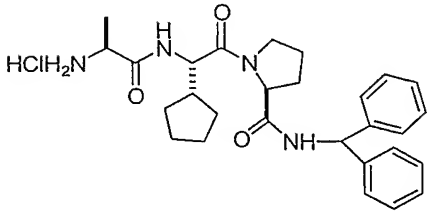
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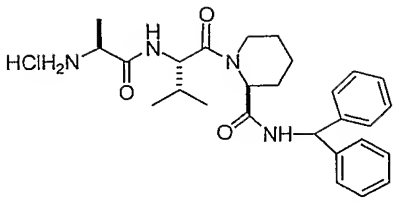
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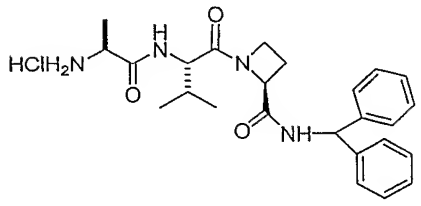
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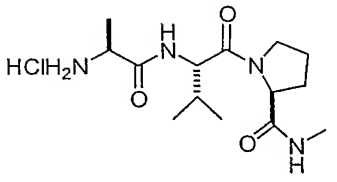
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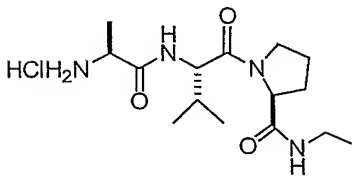
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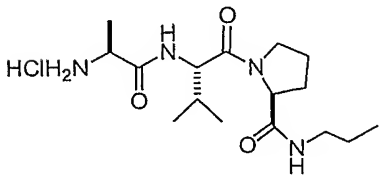
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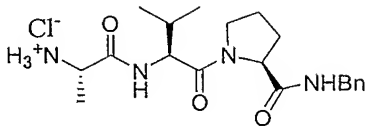
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NHBn

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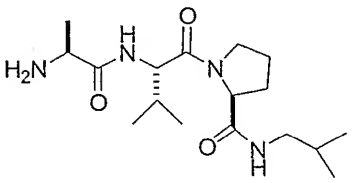
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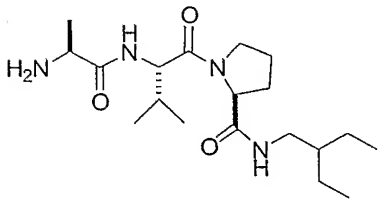
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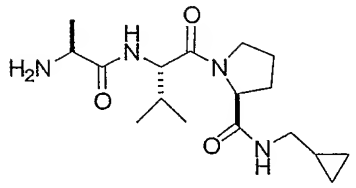
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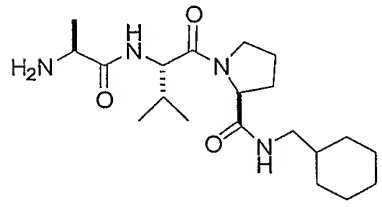
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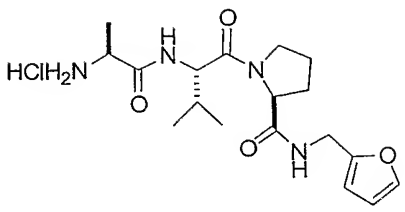

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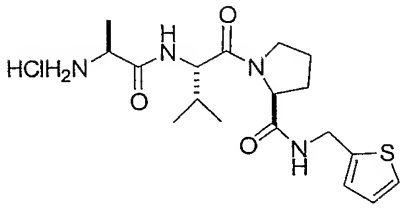

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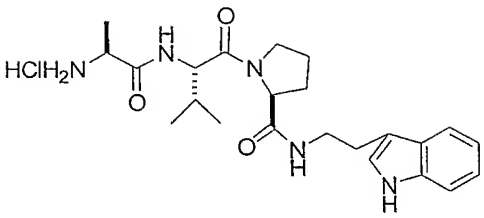

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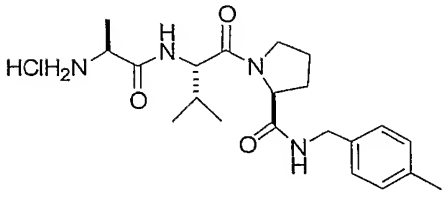

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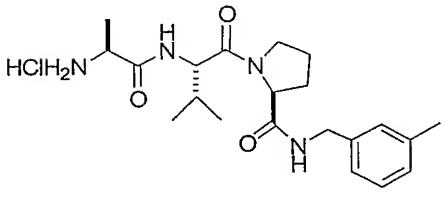

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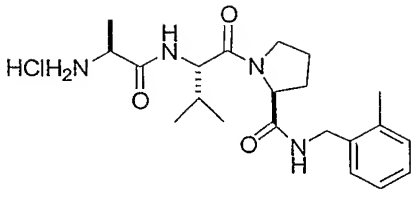

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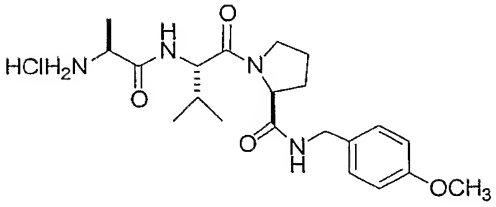

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[0084] The compounds of this invention may be prepared using methods known to those of skill in the art.

[0085] An important aspect of the present invention is that compounds of Formula I induce apoptosis and also potentiate the induction of apoptosis in response to apoptosis induction signals. Therefore, it is contemplated that these compounds sensitize cells to inducers of apoptosis, including cells that are resistant to such inducers. The IAP inhibitors of the present invention can be used to induce apoptosis in any disorder that can be treated, ameliorated, or prevented by the induction of apoptosis. Thus, the present invention provides compositions and methods for targeting animals characterized as overexpressing an IAP protein. In some of the embodiments, the cells (*e.g.*, cancer cells) show elevated expression levels of IAP proteins as compared to non-pathological samples (*e.g.*, non-cancerous cells). In other embodiments, the cells operationally manifest elevated expression levels of IAP proteins by virtue of executing the apoptosis program and dying in response to an inhibiting effective amount of a compound of Formula I, said response

occurring, at least in part, due to the dependence in such cells on IAP protein function for their survival.

[0086] In some embodiments, the compositions and methods of the present invention are used to treat diseased cells, tissues, organs, or pathological conditions and/or disease states in an animal (*e.g.*, a mammalian subject including, but not limited to, humans and veterinary animals). In this regard, various diseases and pathologies are amenable to treatment or prophylaxis using the present methods and compositions. A non-limiting exemplary list of these diseases and conditions includes, but is not limited to, breast cancer, prostate cancer, lymphoma, skin cancer, pancreatic cancer, colon cancer, melanoma, malignant melanoma, ovarian cancer, brain cancer, primary brain carcinoma, head–neck cancer, glioma, glioblastoma, liver cancer, bladder cancer, non-small cell lung cancer, head or neck carcinoma, breast carcinoma, ovarian carcinoma, lung carcinoma, small-cell lung carcinoma, Wilms' tumor, cervical carcinoma, testicular carcinoma, bladder carcinoma, pancreatic carcinoma, stomach carcinoma, colon carcinoma, prostatic carcinoma, genitourinary carcinoma, thyroid carcinoma, esophageal carcinoma, myeloma, multiple myeloma, adrenal carcinoma, renal cell carcinoma, endometrial carcinoma, adrenal cortex carcinoma, malignant pancreatic insulinoma, malignant carcinoid carcinoma, choriocarcinoma, mycosis fungoides, malignant hypercalcemia, cervical hyperplasia, leukemia, acute lymphocytic leukemia, chronic lymphocytic leukemia, acute myelogenous leukemia, chronic myelogenous leukemia, chronic granulocytic leukemia, acute granulocytic leukemia, hairy cell leukemia, neuroblastoma, rhabdomyosarcoma, Kaposi's sarcoma, polycythemia vera, essential thrombocytosis, Hodgkin's disease, non-Hodgkin's lymphoma, soft-tissue sarcoma, osteogenic sarcoma, primary macroglobulinemia, and retinoblastoma, and the like, T and B cell mediated autoimmune diseases; inflammatory diseases; infections; hyperproliferative diseases; AIDS; degenerative conditions, vascular diseases, and the like. In some

embodiments, the cancer cells being treated are metastatic. In other embodiments, the cancer cells being treated are resistant to anticancer agents.

[0087] In some embodiments, infections suitable for treatment with the compositions and methods of the present invention include, but are not limited to, infections caused by viruses, bacteria, fungi, mycoplasma, prions, and the like.

[0088] Some embodiments of the present invention provide methods for administering an effective amount of a compound of Formula I and at least one additional therapeutic agent (including, but not limited to, chemotherapeutic antineoplastics, antimicrobials, antivirals, antifungals, and anti-inflammatory agents) and/or therapeutic technique (*e.g.*, surgical intervention, and/or radiotherapies).

[0089] A number of suitable anticancer agents are contemplated for use in the methods of the present invention. Indeed, the present invention contemplates, but is not limited to, administration of numerous anticancer agents such as: agents that induce apoptosis; polynucleotides (*e.g.*, anti-sense, ribozymes, siRNA); polypeptides (*e.g.*, enzymes and antibodies); biological mimetics (*e.g.*, gossypol or BH3 mimetics); agents that bind (*e.g.*, oligomerize or complex) with a Bcl-2 family protein such as Bax; alkaloids; alkylating agents; antitumor antibiotics; antimetabolites; hormones; platinum compounds; monoclonal or polyclonal antibodies (*e.g.*, antibodies conjugated with anticancer drugs, toxins, defensins), toxins; radionuclides; biological response modifiers (*e.g.*, interferons (*e.g.*, IFN-α) and interleukins (*e.g.*, IL-2)); adoptive immunotherapy agents; hematopoietic growth factors; agents that induce tumor cell differentiation (*e.g.*, all-trans-retinoic acid); gene therapy reagents (*e.g.*, antisense therapy reagents and nucleotides); tumor vaccines; angiogenesis inhibitors; proteosome inhibitors: NF-KB modulators; anti-CDK compounds; HDAC inhibitors; and the like. Numerous other examples of chemotherapeutic compounds and anticancer therapies suitable for co-administration with the disclosed compounds are known to those skilled in the art.

[0090] In preferred embodiments, anticancer agents comprise agents that induce or stimulate apoptosis. Agents that induce apoptosis include, but are not limited to, radiation (*e.g.*, X-rays, gamma rays, UV); kinase inhibitors (*e.g.*, epidermal growth factor receptor (EGFR) kinase inhibitor, vascular growth factor receptor (VGFR) kinase inhibitor, fibroblast growth factor receptor (FGFR) kinase inhibitor, platelet-derived growth factor receptor (PDGFR) kinase inhibitor, and Bcr-Abl kinase inhibitors (such as GLEEVEC)); antisense molecules; antibodies (*e.g.*, HERCEPTIN, RITUXAN, ZEVALIN, and AVASTIN); anti-estrogens (*e.g.*, raloxifene and tamoxifen); anti-androgens (*e.g.*, flutamide, bicalutamide, finasteride, aminoglutethamide, ketoconazole, and corticosteroids); cyclooxygenase 2 (COX-2) inhibitors (*e.g.*, celecoxib, meloxicam, NS-398, and non-steroidal anti-inflammatory drugs (NSAIDs)); anti-inflammatory drugs (*e.g.*, butazolidin, DECADRON, DELTASONE, dexamethasone, dexamethasone intensol, DEXONE, HEXADROL, hydroxychloroquine, METICORTEN, ORADEXON, ORASONE, oxyphenbutazone, PEDIAPRED, phenylbutazone, PLAQUENIL, prednisolone, prednisone, PRELONE, and TANDEARIL); and cancer chemotherapeutic drugs (*e.g.*, irinotecan (CAMPTOSAR), CPT-11, fludarabine (FLUDARA), dacarbazine (DTIC), dexamethasone, mitoxantrone, MYLOTARG, VP-16, cisplatin, carboplatin, oxaliplatin, 5-FU, doxorubicin, gemcitabine, bortezomib, gefitinib, bevacizumab, TAXOTERE or TAXOL); cellular signaling molecules; ceramides and cytokines; staurosporine, and the like.

[0091] In still other embodiments, the compositions and methods of the present invention provide a compound of Formula I and at least one anti-hyperproliferative or antineoplastic agent selected from alkylating agents, antimetabolites, and natural products (*e.g.*, herbs and other plant and/or animal derived compounds).

[0092] Alkylating agents suitable for use in the present compositions and methods include, but are not limited to: 1) nitrogen mustards (*e.g.*, mechlorethamine, cyclophosphamide, ifosfamide, melphalan (L-sarcolysin);

and chlorambucil); 2) ethylenimines and methylmelamines (*e.g.*, hexamethylmelamine and thiotepa); 3) alkyl sulfonates (*e.g.*, busulfan); 4) nitrosoureas (*e.g.*, carmustine (BCNU); lomustine (CCNU); semustine (methyl-CCNU); and streptozocin (streptozotocin)); and 5) triazenes (*e.g.*, dacarbazine (DTIC; dimethyltriazenoimid-azolecarboxamide).

[0093] In some embodiments, antimetabolites suitable for use in the present compositions and methods include, but are not limited to: 1) folic acid analogs (*e.g.*, methotrexate (amethopterin)); 2) pyrimidine analogs (*e.g.*, fluorouracil (5-fluorouracil; 5-FU), floxuridine (fluorode-oxyuridine; FudR), and cytarabine (cytosine arabinoside)); and 3) purine analogs (*e.g.*, mercaptopurine (6-mercaptopurine; 6-MP), thioguanine (6-thioguanine; TG), and pentostatin (2'-deoxycoformycin)).

[0094] In still further embodiments, chemotherapeutic agents suitable for use in the compositions and methods of the present invention include, but are not limited to: 1) vinca alkaloids (*e.g.*, vinblastine (VLB), vincristine); 2) epipodophyllotoxins (*e.g.*, etoposide and teniposide); 3) antibiotics (*e.g.*, dactinomycin (actinomycin D), daunorubicin (daunomycin; rubidomycin), doxorubicin, bleomycin, plicamycin (mithramycin), and mitomycin (mitomycin C)); 4) enzymes (*e.g.*, L-asparaginase); 5) biological response modifiers (*e.g.*, interferon-alfa); 6) platinum coordinating complexes (*e.g.*, cisplatin (cis-DDP) and carboplatin); 7) anthracenediones (*e.g.*, mitoxantrone); 8) substituted ureas (*e.g.*, hydroxyurea); 9) methylhydrazine derivatives (*e.g.*, procarbazine (N-methylhydrazine; MIH)); 10) adrenocortical suppressants (*e.g.*, mitotane (o,p' –DDD) and aminoglutethimide); 11) adrenocorticosteroids (*e.g.*, prednisone); 12) progestins (*e.g.*, hydroxyprogesterone caproate, medroxyprogesterone acetate, and megestrol acetate); 13) estrogens (*e.g.*, diethylstilbestrol and ethinyl estradiol); 14) antiestrogens (*e.g.*, tamoxifen); 15) androgens (*e.g.*, testosterone propionate and fluoxymesterone); 16) antiandrogens (*e.g.*, flutamide): and 17) gonadotropin-releasing hormone analogs (*e.g.*, leuprolide).

[0095] Any oncolytic agent that is routinely used in a cancer therapy context finds use in the compositions and methods of the present invention. For example, the U.S. Food and Drug Administration maintains a formulary of oncolytic agents approved for use in the United States. International counterpart agencies to the U.S.F.D.A. maintain similar formularies. Table 1 provides a list of exemplary antineoplastic agents approved for use in the U.S. Those skilled in the art will appreciate that the "product labels" required on all U.S. approved chemotherapeutics describe approved indications, dosing information, toxicity data, and the like, for the exemplary agents.

Table 1

Aldesleukin (des-alanyl-1, serine-125 human interleukin-2)	Proleukin	Chiron Corp., Emeryville, CA
Alemtuzumab (IgG1κ anti CD52 antibody)	Campath	Millennium and ILEX Partners, LP, Cambridge, MA
Alitretinoin (9-cis-retinoic acid)	Panretin	Ligand Pharmaceuticals, Inc., San Diego CA
Allopurinol (1,5-dihydro-4 H -pyrazolo[3,4-d]pyrimidin-4-one monosodium salt)	Zyloprim	GlaxoSmithKline, Research Triangle Park, NC
Altretamine (N,N,N',N',N",N",- hexamethyl-1,3,5-triazine-2, 4, 6-triamine)	Hexalen	US Bioscience, West Conshohocken, PA
Amifostine (ethanethiol, 2-[(3-aminopropyl)amino]-, dihydrogen phosphate (ester))	Ethyol	US Bioscience
Anastrozole (1,3-Benzenediacetonitrile, a, a, a', a'-tetramethyl-5-(1H-1,2,4-triazol-1-ylmethyl))	Arimidex	AstraZeneca Pharmaceuticals, LP, Wilmington, DE
Arsenic trioxide	Trisenox	Cell Therapeutic, Inc., Seattle, WA
Asparaginase (L-asparagine amidohydrolase, type EC-2)	Elspar	Merck & Co., Inc., Whitehouse Station, NJ
BCG Live (lyophilized preparation of an attenuated strain of *Mycobacterium bovis* (*Bacillus Calmette-Gukin* [BCG], substrain Montreal)	TICE BCG	Organon Teknika, Corp., Durham, NC
bexarotene capsules (4-[1-(5,6,7,8-tetrahydro-3,5,5,8,8-pentamethyl-2-napthalenyl) ethenyl] benzoic acid)	Targretin	Ligand Pharmaceuticals
bexarotene gel	Targretin	Ligand Pharmaceuticals

Bleomycin (cytotoxic glycopeptide antibiotics produced by *Streptomyces verticillus*; bleomycin A_2 and bleomycin B_2)	Blenoxane	Bristol-Myers Squibb Co., NY, NY
Capecitabine (5'-deoxy-5-fluoro-N-[(pentyloxy)carbonyl]-cytidine)	Xeloda	Roche
Carboplatin (platinum, diammine [1,1-cyclobutanedicarboxylato(2-)-0, 0']-,(SP-4-2))	Paraplatin	Bristol-Myers Squibb
Carmustine (1,3-bis(2-chloroethyl)-1-nitrosourea)	BCNU, BiCNU	Bristol-Myers Squibb
Carmustine with Polifeprosan 20 Implant	Gliadel Wafer	Guilford Pharmaceuticals, Inc., Baltimore, MD
Celecoxib (as 4-[5-(4-methylphenyl)-3- (trifluoromethyl)-1H-pyrazol-1-yl] benzenesulfonamide)	Celebrex	Searle Pharmaceuticals, England
Chlorambucil (4-[bis(2chlorethyl)amino]benzenebutanoic acid)	Leukeran	GlaxoSmithKline
Cisplatin ($PtCl_2H_6N_2$)	Platinol	Bristol-Myers Squibb
Cladribine (2-chloro-2'-deoxy-b-D-adenosine)	Leustatin, 2-CdA	R.W. Johnson Pharmaceutical Research Institute, Raritan, NJ
Cyclophosphamide (2-[bis(2-chloroethyl)amino] tetrahydro-2H-13,2-oxazaphosphorine 2-oxide monohydrate)	Cytoxan, Neosar	Bristol-Myers Squibb
Cytarabine (1-b-D-Arabinofuranosylcytosine, $C_9H_{13}N_3O_5$)	Cytosar-U	Pharmacia & Upjohn Company
cytarabine liposomal	DepoCyt	Skye Pharmaceuticals, Inc., San Diego, CA
Dacarbazine (5-(3,3-dimethyl-l-triazeno)-imidazole-4-carboxamide (DTIC))	DTIC-Dome	Bayer AG, Leverkusen, Germany
Dactinomycin, actinomycin D (actinomycin produced by *Streptomyces parvullus*, $C_{62}H_{86}N_{12}O_{16}$)	Cosmegen	Merck
Darbepoetin alfa (recombinant peptide)	Aranesp	Amgen, Inc., Thousand Oaks, CA
daunorubicin liposomal ((8S-cis)-8-acetyl-10-[(3-amino-2,3,6-trideoxy-á-L-lyxo-hexopyranosyl)oxy]-7,8,9,10-tetrahydro-6,8,11-trihydroxy-1-methoxy-5,12-naphthacenedione hydrochloride)	DanuoXome	Nexstar Pharmaceuticals, Inc., Boulder, CO
Daunorubicin HCl, daunomycin ((1 *S* ,3 *S*)-3-Acetyl-1,2,3,4,6,11-hexahydro-3,5,12-trihydroxy-10-methoxy-6,11-dioxo-1-naphthacenyl 3-amino-2,3,6-trideoxy-(alpha)-L-*lyxo* -hexopyranoside hydrochloride)	Cerubidine	Wyeth Ayerst, Madison, NJ

Denileukin diftitox (recombinant peptide)	Ontak	Seragen, Inc., Hopkinton, MA
Dexrazoxane ((S)-4,4'-(1-methyl-1,2-ethanediyl)bis-2,6-piperazinedione)	Zinecard	Pharmacia & Upjohn Company
Docetaxel ((2R,3S)-N-carboxy-3-phenylisoserine, N-tert-butyl ester, 13-ester with 5b-20-epoxy-12a,4,7b,10b,13a-hexahydroxytax- 11-en-9-one 4-acetate 2-benzoate, trihydrate)	Taxotere	Aventis Pharmaceuticals, Inc., Bridgewater, NJ
Doxorubicin HCl (8S,10S)-10-[(3-amino-2,3,6-trideoxy-a-L-lyxo-hexopyranosyl)oxy] -8-glycolyl-7,8,9,10-tetrahydro-6,8,11- trihydroxy-1-methoxy-5,12-naphthacenedione hydrochloride)	Adriamycin, Rubex	Pharmacia & Upjohn Company
doxorubicin	Adriamycin PFS Intravenous injection	Pharmacia & Upjohn Company
doxorubicin liposomal	Doxil	Sequus Pharmaceuticals, Inc., Menlo park, CA
dromostanolone propionate (17b-Hydroxy-2a-methyl-5a-androstan-3-one propionate)	Dromostanolone	Eli Lilly & Company, Indianapolis, IN
dromostanolone propionate	Masterone injection	Syntex, Corp., Palo Alto, CA
Elliott's B Solution	Elliott's B Solution	Orphan Medical, Inc
Epirubicin ((8S-cis)-10-[(3-amino-2,3,6-trideoxy-a-L-arabino-hexopyranosyl)oxy]-7,8,9,10-tetrahydro-6,8,11-trihydroxy-8- (hydroxyacetyl)-1-methoxy-5,12-naphthacenedione hydrochloride)	Ellence	Pharmacia & Upjohn Company
Epoetin alfa (recombinant peptide)	Epogen	Amgen, Inc
Estramustine (estra-1,3,5(10)-triene-3,17-diol(17(beta))-, 3-[bis(2-chloroethyl)carbamate] 17-(dihydrogen phosphate), disodium salt, monohydrate, or estradiol 3-[bis(2-chloroethyl)carbamate] 17-(dihydrogen phosphate), disodium salt, monohydrate)	Emcyt	Pharmacia & Upjohn Company
Etoposide phosphate (4'-Demethylepipodophyllotoxin 9-[4,6-O-(R)-ethylidene-(beta)-D-glucopyranoside], 4'-(dihydrogen phosphate))	Etopophos	Bristol-Myers Squibb
etoposide, VP-16 (4'-demethylepipodophyllotoxin 9-[4,6-0-(R)-ethylidene-(beta)-D-glucopyranoside])	Vepesid	Bristol-Myers Squibb
Exemestane (6-methylenandrosta-1,4-diene-3, 17-dione)	Aromasin	Pharmacia & Upjohn Company
Filgrastim (r-metHuG-CSF)	Neupogen	Amgen, Inc
floxuridine (intraarterial)	FUDR	Roche

(2'-deoxy-5-fluorouridine)		
Fludarabine (fluorinated nucleotide analog of the antiviral agent vidarabine, 9-b -D-arabinofuranosyladenine (ara-A))	Fludara	Berlex Laboratories, Inc., Cedar Knolls, NJ
Fluorouracil, 5-FU (5-fluoro-2,4(1H,3H)-pyrimidinedione)	Adrucil	ICN Pharmaceuticals, Inc., Humacao, Puerto Rico
Fulvestrant (7-alpha-[9-(4,4,5,5,5-penta fluoropentylsulphinyl) nonyl]estra-1,3,5-(10)- triene-3,17-beta-diol)	Faslodex	IPR Pharmaceuticals, Guayama, Puerto Rico
Gemcitabine (2'-deoxy-2', 2'-difluorocytidine monohydrochloride (b-isomer))	Gemzar	Eli Lilly
Gemtuzumab Ozogamicin (anti-CD33 hP67.6)	Mylotarg	Wyeth Ayerst
Goserelin acetate (acetate salt of [D-Ser(But)^{6},Azgly^{10}]LHRH; pyro-Glu-His-Trp-Ser-Tyr-D-Ser(But)-Leu-Arg-Pro-Azgly-NH2 acetate [$C_{59}H_{84}N_{18}O_{14}$ •$(C_2H_4O_2)_x$	Zoladex Implant	AstraZeneca Pharmaceuticals
Hydroxyurea	Hydrea	Bristol-Myers Squibb
Ibritumomab Tiuxetan (immunoconjugate resulting from a thiourea covalent bond between the monoclonal antibody Ibritumomab and the linker-chelator tiuxetan [N-[2-bis(carboxymethyl)amino]-3-(p-isothiocyanatophenyl)- propyl]-[N-[2-bis(carboxymethyl)amino]-2-(methyl) - ethyl]glycine)	Zevalin	Biogen IDEC, Inc., Cambridge MA
Idarubicin (5, 12-Naphthacenedione, 9-acetyl-7-[(3-amino-2,3,6-trideoxy-(alpha)-L- lyxo - hexopyranosyl)oxy]-7,8,9,10-tetrahydro-6,9,11-trihydroxyhydrochloride, (7S- cis))	Idamycin	Pharmacia & Upjohn Company
Ifosfamide (3-(2-chloroethyl)-2-[(2-chloroethyl)amino]tetrahydro-2H-1,3,2-oxazaphosphorine 2-oxide)	IFEX	Bristol-Myers Squibb
Imatinib Mesilate (4-[(4-Methyl-1-piperazinyl)methyl]-N-[4-methyl-3-[[4-(3-pyridinyl)-2-pyrimidinyl]amino]-phenyl]benzamide methanesulfonate)	Gleevec	Novartis AG, Basel, Switzerland
Interferon alfa-2a (recombinant peptide)	Roferon-A	Hoffmann-La Roche, Inc., Nutley, NJ
Interferon alfa-2b (recombinant peptide)	Intron A (Lyophilized Betaseron)	Schering AG, Berlin, Germany
Irinotecan HCl ((4S)-4,11-diethyl-4-hydroxy-9-[(4- piperi-dinopiperidino)carbonyloxy]-1H-pyrano[3', 4': 6,7] indolizino[1,2-b] quinoline-3,14(4H, 12H) dione hydrochloride trihydrate)	Camptosar	Pharmacia & Upjohn Company
Letrozole (4,4'-(1H-1,2,4 -Triazol-1-ylmethylene)	Femara	Novartis

dibenzonitrile)		
Leucovorin (L-Glutamic acid, N[4[[(2amino-5-formyl-1,4,5,6,7,8 hexahydro4oxo6-pteridinyl)methyl]amino]benzoyl], calcium salt (1:1))	Wellcovorin, Leucovorin	Immunex, Corp., Seattle, WA
Levamisole HCl ((-)-(S)-2,3,5, 6-tetrahydro-6-phenylimidazo [2,1-b] thiazole monohydrochloride $C_{11}H_{12}N_2S \cdot$ HCl)	Ergamisol	Janssen Research Foundation, Titusville, NJ
Lomustine (1-(2-chloro-ethyl)-3-cyclohexyl-1-nitrosourea)	CeeNU	Bristol-Myers Squibb
Meclorethamine, nitrogen mustard (2-chloro-N-(2-chloroethyl)-N-methylethanamine hydrochloride)	Mustargen	Merck
Megestrol acetate 17α(acetyloxy)- 6- methylpregna- 4,6- diene-3,20- dione	Megace	Bristol-Myers Squibb
Melphalan, L-PAM (4-[bis(2-chloroethyl) amino]-L-phenylalanine)	Alkeran	GlaxoSmithKline
Mercaptopurine, 6-MP (1,7-dihydro-6 H -purine-6-thione monohydrate)	Purinethol	GlaxoSmithKline
Mesna (sodium 2-mercaptoethane sulfonate)	Mesnex	Asta Medica
Methotrexate (N-[4-[[(2,4-diamino-6-pteridinyl)methyl]methylamino]benzoyl]-L-glutamic acid)	Methotrexate	Lederle Laboratories
Methoxsalen (9-methoxy-7H-furo[3,2-g][1]-benzopyran-7-one)	Uvadex	Therakos, Inc., Way Exton, Pa
Mitomycin C	Mutamycin	Bristol-Myers Squibb
mitomycin C	Mitozytrex	SuperGen, Inc., Dublin, CA
Mitotane (1,1-dichloro-2-(o-chlorophenyl)-2-(p-chlorophenyl) ethane)	Lysodren	Bristol-Myers Squibb
Mitoxantrone (1,4-dihydroxy-5,8-bis[[2- [(2-hydroxyethyl)amino]ethyl]amino]-9,10-anthracenedione dihydrochloride)	Novantrone	Immunex Corporation
Nandrolone phenpropionate	Durabolin-50	Organon, Inc., West Orange, NJ
Nofetumomab	Verluma	Boehringer Ingelheim Pharma KG, Germany
Oprelvekin (IL-11)	Neumega	Genetics Institute, Inc., Alexandria, VA
Oxaliplatin (cis-[(1R,2R)-1,2-cyclohexanediamine-N,N'] [oxalato(2-)-O,O'] platinum)	Eloxatin	Sanofi Synthelabo, Inc., NY, NY
Paclitaxel (5ß, 20-Epoxy-1,2a, 4,7ß, 10ß, 13a-hexahydroxytax-11-en-9-one 4,10-diacetate 2-benzoate 13-ester with (2R, 3 S)- N-benzoyl-3-	TAXOL	Bristol-Myers Squibb

phenylisoserine)		
Pamidronate (phosphonic acid (3-amino-1-hydroxypropylidene) bis-, disodium salt, pentahydrate, (APD))	Aredia	Novartis
Pegademase ((monomethoxypolyethylene glycol succinimidyl) 11 - 17 -adenosine deaminase)	Adagen (Pegademase Bovine)	Enzon Pharmaceuticals, Inc., Bridgewater, NJ
Pegaspargase (monomethoxypolyethylene glycol succinimidyl L-asparaginase)	Oncaspar	Enzon
Pegfilgrastim (covalent conjugate of recombinant methionyl human G-CSF (Filgrastim) and monomethoxypolyethylene glycol)	Neulasta	Amgen, Inc
Pentostatin	Nipent	Parke-Davis Pharmaceutical Co., Rockville, MD
Pipobroman	Vercyte	Abbott Laboratories, Abbott Park, IL
Plicamycin, Mithramycin (antibiotic produced by *Streptomyces plicatus*)	Mithracin	Pfizer, Inc., NY, NY
Porfimer sodium	Photofrin	QLT Phototherapeutics, Inc., Vancouver, Canada
Procarbazine (N-isopropyl-μ-(2-methylhydrazino)-p-toluamide monohydrochloride)	Matulane	Sigma Tau Pharmaceuticals, Inc., Gaithersburg, MD
Quinacrine (6-chloro-9-(1 –methyl-4-diethyl-amine) butylamino-2-methoxyacridine)	Atabrine	Abbott Labs
Rasburicase (recombinant peptide)	Elitek	Sanofi-Synthelabo, Inc.,
Rituximab (recombinant anti-CD20 antibody)	Rituxan	Genentech, Inc., South San Francisco, CA
Sargramostim (recombinant peptide)	Prokine	Immunex Corp
Streptozocin (streptozocin 2 –deoxy - 2 - [[(methylnitrosoamino)carbonyl]amino] - a(and b) - D - glucopyranose and 220 mg citric acid anhydrous)	Zanosar	Pharmacia & Upjohn Company
Talc ($Mg_3Si_4O_{10}(OH)_2$)	Sclerosol	Bryan, Corp., Woburn, MA
Tamoxifen ((Z)2-[4-(1,2-diphenyl-1-butenyl) phenoxy]-N, N-dimethylethanamine 2-hydroxy-1,2,3-propanetricarboxylate (1:1))	Nolvadex	AstraZeneca Pharmaceuticals
Temozolomide (3,4-dihydro-3-methyl-4-oxoimidazo[5,1-d]-as-tetrazine-8-carboxamide)	Temodar	Schering
teniposide, VM-26 (4'-demethylepipodophyllotoxin 9-[4,6-0-(R)-2-	Vumon	Bristol-Myers Squibb

thenylidene-(beta)-D-glucopyranoside])		
Testolactone (13-hydroxy-3-oxo-13,17-secoandrosta-1,4-dien-17-oic acid [dgr]-lactone)	Teslac	Bristol-Myers Squibb
Thioguanine, 6-TG (2-amino-1,7-dihydro-6 H - purine-6-thione)	Thioguanine	GlaxoSmithKline
Thiotepa (Aziridine, 1,1',1"-phosphinothioylidynetris-, or Tris (1-aziridinyl) phosphine sulfide)	Thioplex	Immunex Corporation
Topotecan HCl ((S)-10-[(dimethylamino) methyl]-4-ethyl-4,9-dihydroxy-1H-pyrano[3', 4': 6,7] indolizino [1,2-b] quinoline-3,14-(4H,12H)-dione monohydrochloride)	Hycamtin	GlaxoSmithKline
Toremifene (2-(p-[(Z)-4-chloro-1,2-diphenyl-1-butenyl]-phenoxy)-N,N-dimethylethylamine citrate (1:1))	Fareston	Roberts Pharmaceutical Corp., Eatontown, NJ
Tositumomab, I 131 Tositumomab (recombinant murine immunotherapeutic monoclonal IgG_{2a} lambda anti-CD20 antibody (I 131 is a radioimmunotherapeutic antibody))	Bexxar	Corixa Corp., Seattle, WA
Trastuzumab (recombinant monoclonal IgG_1 kappa anti-HER2 antibody)	Herceptin	Genentech, Inc
Tretinoin, ATRA (all-trans retinoic acid)	Vesanoid	Roche
Uracil Mustard	Uracil Mustard Capsules	Roberts Labs
Valrubicin, N-trifluoroacetyladriamycin-14-valerate ((2S-cis)-2- [1,2,3,4,6,11-hexahydro-2,5,12-trihydroxy-7 methoxy-6,11-dioxo-[[4 2,3,6-trideoxy-3- [(trifluoroacetyl)-amino-α-L-*lyxo*-hexopyranosyl]oxyl]-2-naphthacenyl]-2-oxoethyl pentanoate)	Valstar	Anthra --> Medeva
Vinblastine, Leurocristine ($C_{46}H_{56}N_4O_{10}•H_2SO_4$)	Velban	Eli Lilly
Vincristine ($C_{46}H_{56}N_4O_{10}•H_2SO_4$)	Oncovin	Eli Lilly
Vinorelbine (3',4'-didehydro-4'-deoxy-C'-norvincaleukoblastine [R-(R*,R*)-2,3-dihydroxybutanedioate (1:2)(salt)])	Navelbine	GlaxoSmithKline
Zoledronate, Zoledronic acid ((1-Hydroxy-2-imidazol-1-yl-phosphonoethyl) phosphonic acid monohydrate)	Zometa	Novartis

[0096] Preferred conventional anticancer agents for use in administration with the present compounds include, but are not limited to, adriamycin, 5-fluorouracil, etoposide, camptothecin, actinomycin D, mitomycin C, cisplatin, docetaxel, gemcitabine, carboplatin, oxaliplatin, bortezomib, gefitinib, and bevacizumab. These agents can be prepared and used singularly, in combined therapeutic compositions, in kits, or in combination with immunotherapeutic agents, and the like.

[0097] For a more detailed description of anticancer agents and other therapeutic agents, those skilled in the art are referred to any number of instructive manuals including, but not limited to, the Physician's Desk Reference and to Goodman and Gilman's "Pharmaceutical Basis of Therapeutics" ninth edition, Eds. Hardman *et al.*, 1996.

[0098] The present invention provides methods for administering a compound of Formula I with radiation therapy. The invention is not limited by the types, amounts, or delivery and administration systems used to deliver the therapeutic dose of radiation to an animal. For example, the animal may receive photon radiotherapy, particle beam radiation therapy, other types of radiotherapies, and combinations thereof. In some embodiments, the radiation is delivered to the animal using a linear accelerator. In still other embodiments, the radiation is delivered using a gamma knife.

[0099] The source of radiation can be external or internal to the animal. External radiation therapy is most common and involves directing a beam of high-energy radiation to a tumor site through the skin using, for instance, a linear accelerator. While the beam of radiation is localized to the tumor site, it is nearly impossible to avoid exposure of normal, healthy tissue. However, external radiation is usually well tolerated by patients. Internal radiation therapy involves implanting a radiation-emitting source, such as beads, wires, pellets, capsules, particles, and the like, inside the body at or near the tumor site including the use of delivery systems that specifically target cancer cells (*e.g.*, using particles attached to cancer cell binding ligands). Such implants can be removed following treatment, or left in the body inactive. Types of

internal radiation therapy include, but are not limited to, brachytherapy, interstitial irradiation, intracavity irradiation, radioimmunotherapy, and the like.

[00100] The animal may optionally receive radiosensitizers (*e.g.*, metronidazole, misonidazole, intra-arterial Budr, intravenous iododeoxyuridine (IudR), nitroimidazole, 5-substituted-4-nitroimidazoles, 2H-isoindolediones, [[(2-bromoethyl)-amino]methyl]-nitro-1H-imidazole-1-ethanol, nitroaniline derivatives, DNA-affinic hypoxia selective cytotoxins, halogenated DNA ligand, 1,2,4 benzotriazine oxides, 2-nitroimidazole derivatives, fluorine-containing nitroazole derivatives, benzamide, nicotinamide, acridine-intercalator, 5-thiotretrazole derivative, 3-nitro-1,2,4-triazole, 4,5-dinitroimidazole derivative, hydroxylated texaphrins, cisplatin, mitomycin, tiripazamine, nitrosourea, mercaptopurine, methotrexate, fluorouracil, bleomycin, vincristine, carboplatin, epirubicin, doxorubicin, cyclophosphamide, vindesine, etoposide, paclitaxel, heat (hyperthermia), and the like), radioprotectors (*e.g.*, cysteamine, aminoalkyl dihydrogen phosphorothioates, amifostine (WR 2721), IL-1, IL-6, and the like). Radiosensitizers enhance the killing of tumor cells. Radioprotectors protect healthy tissue from the harmful effects of radiation.

[0100] Any type of radiation can be administered to a patient, so long as the dose of radiation is tolerated by the patient without unacceptable negative side-effects. Suitable types of radiotherapy include, for example, ionizing (electromagnetic) radiotherapy (*e.g.*, X-rays or gamma rays) or particle beam radiation therapy (*e.g.*, high linear energy radiation). Ionizing radiation is defined as radiation comprising particles or photons that have sufficient energy to produce ionization, *i.e.*, gain or loss of electrons (as described in, for example, U.S. 5,770,581 incorporated herein by reference in its entirety). The effects of radiation can be at least partially controlled by the clinician. The dose of radiation is preferably fractionated for maximal target cell exposure and reduced toxicity.

[0101] The total dose of radiation administered to an animal preferably is about .01 Gray (Gy) to about 100 Gy. More preferably, about 10 Gy to about 65 Gy (*e.g.*, about 15 Gy, 20 Gy, 25 Gy, 30 Gy, 35 Gy, 40 Gy, 45 Gy, 50 Gy, 55 Gy, or 60 Gy) are administered over the course of treatment. While in some embodiments a complete dose of radiation can be administered over the course of one day, the total dose is ideally fractionated and administered over several days. Desirably, radiotherapy is administered over the course of at least about 3 days, *e.g.*, at least 5, 7, 10, 14, 17, 21, 25, 28, 32, 35, 38, 42, 46, 52, or 56 days (about 1-8 weeks). Accordingly, a daily dose of radiation will comprise approximately 1-5 Gy (*e.g.*, about 1 Gy, 1.5 Gy, 1.8 Gy, 2 Gy, 2.5 Gy, 2.8 Gy, 3 Gy, 3.2 Gy, 3.5 Gy, 3.8 Gy, 4 Gy, 4.2 Gy, or 4.5 Gy), preferably 1-2 Gy (*e.g.*, 1.5-2 Gy). The daily dose of radiation should be sufficient to induce destruction of the targeted cells. If stretched over a period, radiation preferably is not administered every day, thereby allowing the animal to rest and the effects of the therapy to be realized. For example, radiation desirably is administered on 5 consecutive days, and not administered on 2 days, for each week of treatment, thereby allowing 2 days of rest per week. However, radiation can be administered 1 day/week, 2 days/week, 3 days/week, 4 days/week, 5 days/week, 6 days/week, or all 7 days/week, depending on the animal's responsiveness and any potential side effects. Radiation therapy can be initiated at any time in the therapeutic period. Preferably, radiation is initiated in week 1 or week 2, and is administered for the remaining duration of the therapeutic period. For example, radiation is administered in weeks 1-6 or in weeks 2-6 of a therapeutic period comprising 6 weeks for treating, for instance, a solid tumor. Alternatively, radiation is administered in weeks 1-5 or weeks 2-5 of a therapeutic period comprising 5 weeks. These exemplary radiotherapy administration schedules are not intended, however, to limit the present invention.

[0102] Antimicrobial therapeutic agents may also be used as therapeutic agents in the present invention. Any agent that can kill, inhibit, or otherwise attenuate the function of microbial organisms may be used, as well as any

agent contemplated to have such activities. Antimicrobial agents include, but are not limited to, natural and synthetic antibiotics, antibodies, inhibitory proteins (*e.g.*, defensins), antisense nucleic acids, membrane disruptive agents and the like, used alone or in combination. Indeed, any type of antibiotic may be used including, but not limited to, antibacterial agents, antiviral agents, antifungal agents, and the like.

[0103] In some embodiments of the present invention, a compound of Formula I and one or more therapeutic agents or anticancer agents are administered to an animal under one or more of the following conditions: at different periodicities, at different durations, at different concentrations, by different administration routes, *etc.* In some embodiments, the compound is administered prior to the therapeutic or anticancer agent, *e.g.*, 0.5, 1, 2 3, 4, 5, 10, 12, or 18 hours, 1, 2, 3, 4, 5, or 6 days, 1, 2, 3, or 4 weeks prior to the administration of the therapeutic or anticancer agent. In some embodiments, the compound is administered after the therapeutic or anticancer agent, *e.g.*, 0.5, 1, 2 3, 4, 5, 10, 12, or 18 hours, 1, 2, 3, 4, 5, or 6 days, 1, 2, 3, or 4 weeks after the administration of the anticancer agent. In some embodiments, the compound and the therapeutic or anticancer agent are administered concurrently but on different schedules, *e.g.*, the compound is administered daily while the therapeutic or anticancer agent is administered once a week, once every two weeks, once every three weeks, or once every four weeks. In other embodiments, the compound is administered once a week while the therapeutic or anticancer agent is administered daily, once a week, once every two weeks, once every three weeks, or once every four weeks.

[0104] The compounds of the present invention may be linked to a carrier molecule to enhance the cellular uptake of the compounds. Examples of such carrier molecules include carrier peptides such as those described by Fulda *et al.*, *Nature Med. 8*:808 (2002), Arnt *et al.*, *J. Biol. Chem. 277*:44236 (2002), and Yang *et al.*, *Cancer Res. 63*:831 (2003), fusogenic peptides (see, *e.g.*, U.S. Pat. 5,965,404), and viruses and parts of viruses such as empty capsids and virus hemagglutinin (see, *e.g.*, U.S. Pat. No. 5,547,932). Other carrier

molecules include ligands for cell surface receptor such as asialoglycoprotein (which binds to the asialoglycoprotein receptor; see U.S. Pat. No. 5,166,320) and antibodies to cell surface receptors such as antibodies specific for T-cells, *e.g.*, anti-CD4 antibodies (see U.S. Pat. No. 5,693,509).

[0105] Compositions within the scope of this invention include all compositions wherein the compounds of the present invention are contained in an amount which is effective to achieve its intended purpose. While individual needs vary, determination of optimal ranges of effective amounts of each component is within the skill of the art. Typically, the compounds may be administered to mammals, *e.g.* humans, orally at a dose of 0.0025 to 50 mg/kg, or an equivalent amount of the pharmaceutically acceptable salt thereof, per day of the body weight of the mammal being treated for disorders responsive to induction of apoptosis. Preferably, about 0.01 to about 10 mg/kg is orally administered to treat, ameliorate, or prevent such disorders. For intramuscular injection, the dose is generally about one-half of the oral dose. For example, a suitable intramuscular dose would be about 0.0025 to about 25 mg/kg, and most preferably, from about 0.01 to about 5 mg/kg.

[0106] The unit oral dose may comprise from about 0.01 to about 50 mg, preferably about 0.1 to about 10 mg of the compound. The unit dose may be administered one or more times daily as one or more tablets or capsules each containing from about 0.1 to about 10, conveniently about 0.25 to 50 mg of the compound or its solvates.

[0107] In a topical formulation, the compound may be present at a concentration of about 0.01 to 100 mg per gram of carrier. In a preferred embodiment, the compound is present at a concentration of about 0.07-1.0 mg/ml, more preferably, about 0.1-0.5 mg/ml, most preferably, about 0.4 mg/ml.

[0108] In addition to administering the compound as a raw chemical, the compounds of the invention may be administered as part of a pharmaceutical preparation containing suitable pharmaceutically acceptable carriers comprising excipients and auxiliaries which facilitate processing of the

compounds into preparations which can be used pharmaceutically. Preferably, the preparations, particularly those preparations which can be administered orally or topically and which can be used for the preferred type of administration, such as tablets, dragees, slow release lozenges and capsules, mouth rinses and mouth washes, gels, liquid suspensions, hair rinses, hair gels, shampoos and also preparations which can be administered rectally, such as suppositories, as well as suitable solutions for administration by injection, topically or orally, contain from about 0.01 to 99 percent, preferably from about 0.25 to 75 percent of active compound(s), together with the excipient.

[0109] The pharmaceutical compositions of the invention may be administered to any animal which may experience the beneficial effects of the compounds of the invention. Foremost among such animals are mammals, *e.g.*, humans, although the invention is not intended to be so limited. Other animals include veterinary animals (cows, sheep, pigs, horses, dogs, cats and the like).

[0110] The compounds and pharmaceutical compositions thereof may be administered by any means that achieve their intended purpose. For example, administration may be by parenteral, subcutaneous, intravenous, intramuscular, intraperitoneal, transdermal, buccal, intrathecal, intracranial, intranasal or topical routes. Alternatively, or concurrently, administration may be by the oral route. The dosage administered will be dependent upon the age, health, and weight of the recipient, kind of concurrent treatment, if any, frequency of treatment, and the nature of the effect desired.

[0111] The pharmaceutical preparations of the present invention are manufactured in a manner which is itself known, for example, by means of conventional mixing, granulating, dragee-making, dissolving, or lyophilizing processes. Thus, pharmaceutical preparations for oral use can be obtained by combining the active compounds with solid excipients, optionally grinding the resulting mixture and processing the mixture of granules, after adding suitable auxiliaries, if desired or necessary, to obtain tablets or dragee cores.

[0112] Suitable excipients are, in particular, fillers such as saccharides, for example lactose or sucrose, mannitol or sorbitol, cellulose preparations and/or calcium phosphates, for example tricalcium phosphate or calcium hydrogen phosphate, as well as binders such as starch paste, using, for example, maize starch, wheat starch, rice starch, potato starch, gelatin, tragacanth, methyl cellulose, hydroxypropylmethylcellulose, sodium carboxymethylcellulose, and/or polyvinyl pyrrolidone. If desired, disintegrating agents may be added such as the above-mentioned starches and also carboxymethyl-starch, cross-linked polyvinyl pyrrolidone, agar, or alginic acid or a salt thereof, such as sodium alginate. Auxiliaries are, above all, flow-regulating agents and lubricants, for example, silica, talc, stearic acid or salts thereof, such as magnesium stearate or calcium stearate, and/or polyethylene glycol. Dragee cores are provided with suitable coatings which, if desired, are resistant to gastric juices. For this purpose, concentrated saccharide solutions may be used, which may optionally contain gum arabic, talc, polyvinyl pyrrolidone, polyethylene glycol and/or titanium dioxide, lacquer solutions and suitable organic solvents or solvent mixtures. In order to produce coatings resistant to gastric juices, solutions of suitable cellulose preparations such as acetylcellulose phthalate or hydroxypropylmethyl-cellulose phthalate, are used. Dye stuffs or pigments may be added to the tablets or dragee coatings, for example, for identification or in order to characterize combinations of active compound doses.

[0113] Other pharmaceutical preparations which can be used orally include push-fit capsules made of gelatin, as well as soft, sealed capsules made of gelatin and a plasticizer such as glycerol or sorbitol. The push-fit capsules can contain the active compounds in the form of granules which may be mixed with fillers such as lactose, binders such as starches, and/or lubricants such as talc or magnesium stearate and, optionally, stabilizers. In soft capsules, the active compounds are preferably dissolved or suspended in suitable liquids, such as fatty oils, or liquid paraffin. In addition, stabilizers may be added.

[0114] Possible pharmaceutical preparations which can be used rectally include, for example, suppositories, which consist of a combination of one or more of the active compounds with a suppository base. Suitable suppository bases are, for example, natural or synthetic triglycerides, or paraffin hydrocarbons. In addition, it is also possible to use gelatin rectal capsules which consist of a combination of the active compounds with a base. Possible base materials include, for example, liquid triglycerides, polyethylene glycols, or paraffin hydrocarbons.

[0115] Suitable formulations for parenteral administration include aqueous solutions of the active compounds in water-soluble form, for example, water-soluble salts and alkaline solutions. In addition, suspensions of the active compounds as appropriate oily injection suspensions may be administered. Suitable lipophilic solvents or vehicles include fatty oils, for example, sesame oil, or synthetic fatty acid esters, for example, ethyl oleate or triglycerides or polyethylene glycol-400. Aqueous injection suspensions may contain substances which increase the viscosity of the suspension include, for example, sodium carboxymethyl cellulose, sorbitol, and/or dextran. Optionally, the suspension may also contain stabilizers.

[0116] The topical compositions of this invention are formulated preferably as oils, creams, lotions, ointments and the like by choice of appropriate carriers. Suitable carriers include vegetable or mineral oils, white petrolatum (white soft paraffin), branched chain fats or oils, animal fats and high molecular weight alcohol (greater than C_{12}). The preferred carriers are those in which the active ingredient is soluble. Emulsifiers, stabilizers, humectants and antioxidants may also be included as well as agents imparting color or fragrance, if desired. Additionally, transdermal penetration enhancers can be employed in these topical formulations. Examples of such enhancers can be found in U.S. Pat. Nos. 3,989,816 and 4,444,762.

[0117] Creams are preferably formulated from a mixture of mineral oil, self-emulsifying beeswax and water in which mixture the active ingredient, dissolved in a small amount of an oil such as almond oil, is admixed. A typical

example of such a cream is one which includes about 40 parts water, about 20 parts beeswax, about 40 parts mineral oil and about 1 part almond oil.

[0118] Ointments may be formulated by mixing a solution of the active ingredient in a vegetable oil such as almond oil with warm soft paraffin and allowing the mixture to cool. A typical example of such an ointment is one which includes about 30% almond oil and about 70% white soft paraffin by weight.

[0119] Lotions may be conveniently prepared by dissolving the active ingredient, in a suitable high molecular weight alcohol such as propylene glycol or polyethylene glycol.

[0120] The following examples are illustrative, but not limiting, of the method and compositions of the present invention. Other suitable modifications and adaptations of the variety of conditions and parameters normally encountered in clinical therapy and which are obvious to those skilled in the art are within the spirit and scope of the invention.

EXAMPLE 1

Development of Fluorescence Polarization Assay

[0121] A quantitative *in vitro* binding assay using fluorescence polarization was developed. Binding of Smac to XIAP is mediated by a few amino acid residues at the N-terminus of Smac (Figure 1). Two different fluorescent probes were synthesized: the natural 9-mer Smac peptide (AVPIAQKSEK (SEQ ID NO:3)) and a mutated 5-mer Smac peptide (AbuRPFK, wherein Abu = 2-aminobutyric acid (SEQ ID NO:4)). Each probe was labeled with 6-carboxyfluorescein succinimidyl ester (FAM) as the fluorescent tag (AVPIAQKSEK-FAM, termed S9F and AbuRPFK-FAM, termed SM5F, respectively). The unlabeled 9-mer and 5-mer Smac peptides (S9 and SM5) were used as the positive controls. The human XIAP-BIR3 protein (residues 241-356) with a His tag is stable and soluble and was used for the binding assay.

[0122] The dissociation constant value of the fluorescent labeled S9F and SM5F to XIAP-BIR3 was first determined using a constant concentration of the peptide (5 nM) and titrating with increasing concentrations of the protein (0 to 40 μM), significantly above the expected K_d. Figure 2 shows the nonlinear least-squares fit to a single-site binding model for the saturation experiments. It was determined that S9F has a K_d value of 0.24 μM with a maximum binding range of 236 mP ± 1.21 mP. The SM5F probe had a K_d value of 0.018 μM (17.92 nM) and a larger dynamic range with maximum binding of 276 mP ± 0.75 mP. The assay was stable over a 24 hour period, the K_d values and binding ranges remained unchanged and 4% DMSO had no influence.

[0123] Because SM5F had a higher binding affinity (about 10 times higher) and a larger dynamic range than the natural Smac peptide S9F, this labeled peptide was selected for the competitive binding assay. The assay conditions used were 5 nM SM5F and 0.030 μM XIAP-BIR3 protein based on the following considerations: 0.030 μM XIAP is about 2 times higher than the K_d of SM5F; and 5 nM SM5F has sufficient fluorescence intensity to overcome the fluorescence background in case some of the inhibitors have a certain level of fluorescence. Under these conditions, the tracer is saturated about 60%, making the assay sensitive. The mP range (mP of bound peptide – mP of free peptide) is 88 ± 2.43 mP, which is a large polarization signal window for accurate detection of mP change. The Z' factor, a statistical parameter for the quality of the assay, is 0.88, which confirms that the fluorescence polarization assay based on the SM5F probe is adequate for high-throughput screening.

[0124] The specificity of the assay was verified in a competition experiment with corresponding unlabeled mutated Smac 5-mer (SM5) and the natural Smac 9-mer (S9) peptides (Figure 3). In both cases, the data indicated that unlabeled peptides were able to abrogate binding of the labeled tracer. IC_{50} values of 1.49 ± 0.21μM (K_i = 0.54 ± 0.15 μM) for S9 and 0.22 ± 0.01μM (K_i = 0.075 ± 0.005 μM for SM5 were obtained. The obtained IC_{50} values are higher than the K_d values of the protein/peptide pair, because in order to

maximize the signal-to-noise ratio, the protein concentration in the competitive FP binding assay is higher than the determined K_d. However, the ratio of the IC_{50} values of these two unlabeled peptides correlates well with the ratio of the K_d values of their corresponding labeled peptides. The ratio of the IC_{50} values for the unlabeled SM5 and S9 peptides is 6.7 fold, while the ratio of the K_d values between labeled SM5F and S9F is 7.2 fold. For this reason, for the designed Smac mimetics, the IC_{50} values are reported with the IC_{50} value of the natural Smac peptide (S9) and the mutated Smac peptide (SM5) under the same conditions together with the K_d values of labeled SM5F and S9F for proper comparison of their binding affinities. Additionally, a new mathematical equation for computing binding affinities (K_i) of the inhibitors in the FP based binding assay was developed, overcoming the problem of high IC_{50} values. The obtained K_d values of labeled peptides (S9F and SM5F) determined by the direct binding experiment are similar to the K_i values of the unlabeled peptides obtained from the competition assay and calculated with the new equation.

[0125] To further evaluate the assay conditions two additional published Smac tetrapeptides with different binding affinity to XIAP BIR3 were tested (Figure 3) (Kipp *et al.*, *Biochemistry 41*:7344 (2002)). AVPI (SEQ ID NO:1), the natural Smac peptide, had an IC_{50} value of 1.58 ± 0.22 μM (K_i = 0.58 ± 0.15 μM), which is essentially the same as the natural Smac 9-mer S9. Another peptide, AVPR (SEQ ID NO:5), which was reported to have a much weaker affinity than the AVPI (SEQ ID NO:1) peptide, was determined to have an IC_{50} value of 79.31 ± 8.8 μM (K_i = 29.09 ± 1.88 μM) under these assay conditions. The order of the obtained peptide affinities for the XIAP protein in these binding experiments correlates well with the published results (AbuRPFK (SEQ ID NO:4) > AVPI (SEQ ID NO:1) = AVPIAQKSEK (SEQ ID NO:3) > AVPR (SEQ ID NO:5)). The results suggest the FP-based binding assay is suitable for accurate and quantitative determination of the binding affinity of Smac peptides with very different binding affinities.

EXAMPLE 2

Analysis of the Interaction Between Smac and XIZP BIR3 Based Upon Experimental 3D Structures

[0126] The high resolution experimental 3D structures of the XIAP BIR3 domain in complex with Smac protein and peptide (Figure 1) provided a solid structural basis for the design of potent Smac mimetics. The amine group of alanine in position 1 (A1') forms four hydrogen bonds with the side chain of Q319 and E314 and the backbone carbonyl group of D309. The methyl group in alanine binds to a small but well-defined hydrophobic pocket. Our analysis showed that this hydrophobic pocket may accommodate a slightly larger hydrophobic group than methyl. The backbone carbonyl of the alanine residue forms a hydrogen bond with the side chain of W323 but this hydrogen bond is not optimal based upon its geometric parameters.

[0127] The amino and carbonyl groups of valine (V2') in Smac form two optimal hydrogen bonds to the backbone carbonyl and amino groups of T308, respectively. Its side chain isopropyl group appears not to have close contacts with residues in XIAP BIR3 and is approximately 4-5 Å away from W323 in XIAP BIR3.

[0128] The proline residue in position 3 (P3') plays an important role in controlling the conformation of Smac peptide and is in close contact with the hydrophobic side chain of W323 in XIAP BIR3. Its backbone carbonyl group points toward solvent and does not have specific interactions with the protein.

[0129] The hydrophobic side chain of the isoleucine residue at position 4 (I4') binds to a well-defined hydrophobic pocket in XIAP BIR3. The amino group of I4' forms a hydrogen bond with the backbone carbonyl of G306 and the carbonyl group does not have specific interactions with the protein.

[0130] Of note, similar interactions were observed in the recently determined high resolution X-ray structure of caspase-9 and XIAP BIR3, in which four residues ATPF (SEQ ID NO:2) in caspase-9 mediate the interactions with

XIAP BIR3. These atomic detailed, high resolution experimental structures provide a concrete structural basis for designing Smac mimetics.

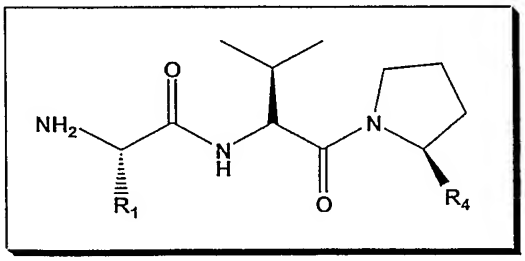
EXAMPLE 3

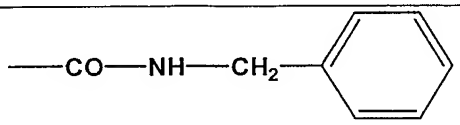
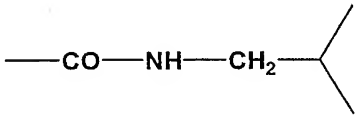
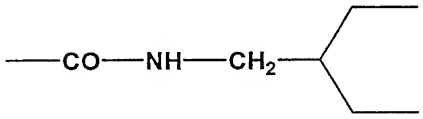
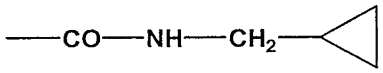
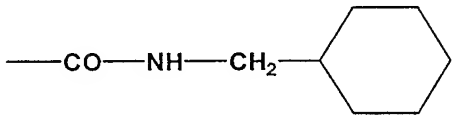
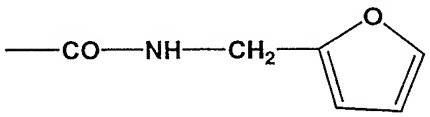
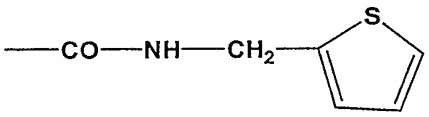
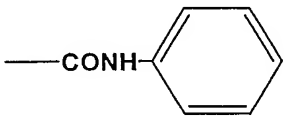
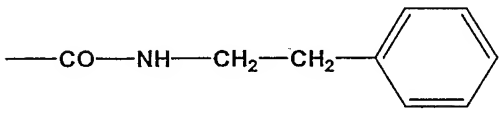
Design of Smac Peptidomimetics

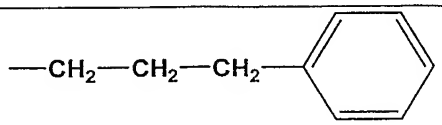
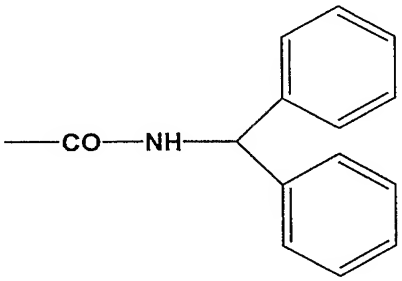
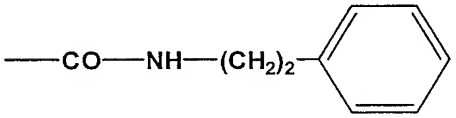
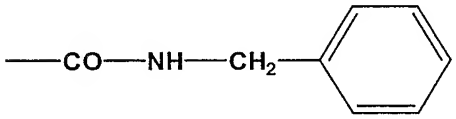
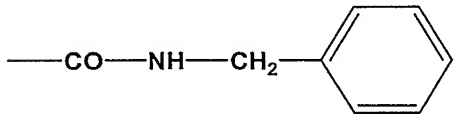
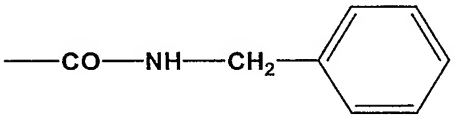
[0131] A series of Smac peptidomimetics were synthesized to (1) further prove the interactions between Smac and XIAP BIR3; (2) to obtain Smac peptidomimetics more potent than the AVPI (SEQ ID NO:1) natural Smac peptide; (3) to derive Smac peptidomimetics with much improved cell-permeability and stability over Smac peptide.

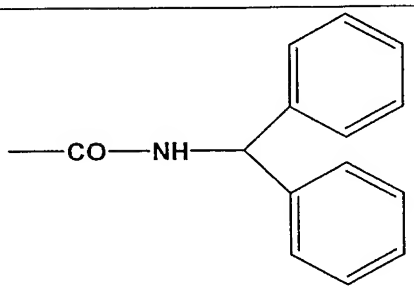
[0132] Based upon the experimental structures (Figure 1), the backbone carbonyl group of I4' does not have specific interactions with the protein and the hydrophobic side chain inserts into a hydrophobic pocket. A simple benzyl amine was employed to mimic I4' residue (compound 1 in Table 2). Computational modeling showed that this simple benzyl amine mimics the I4' for both hydrophobic and hydrogen bonding interactions with the protein (Figure 4). Compound 1 has a K_i value of 0.42 μM in the FP-based assay, as potent as the natural AVPI (SEQ ID NO:1) Smac peptide (K_i = 0.56 μM). Compound 1 was subsequently used as the template for designing other Smac peptidomimetics. To further explore the importance of the hydrophobic interactions between the phenyl ring in compound 1 and XIAP, a series of Smac peptidomimetics with different hydrophobic groups were synthesized and tested (compounds 2-13).

Table 2



	R_1	R_4	K_i (μM)
1	CH_3		0.42 ± 0.07
2	CH_3		18.8 ± 1.6
3	CH_3		3.5 ± 0.7
4	CH_3		6.2 ± 1.5
5	CH_3		1.8 ± 0.2
6	CH_3		0.32 ± 0.07
7	CH_3		0.27 ± 0.07
8	CH_3		6.8 ± 2.1
9	CH_3		0.22 ± 0.09

	R_1	R_4	K_i (μM)
10	CH_3		1.7 ± 0.4
11	CH_3		0.050 ± 0.020
12	H		95 ± 7
13	C_2H_5		0.13 ± 0.06
14	i-C_3H_7		5.8 ± 1.2
15	n-C_3H_7		76 ± 7

	R_1	R_4	K_i (μM)
16	C_2H_5		0.044 ± 0.020

[0133] Replacement of the phenyl ring in compound 1 with an isopropyl group (compound 2) reduced the binding affinity by about 45-fold, suggesting that isopropyl is not large enough for achieving optimal hydrophobic interactions at this site. Consistent with this result, replacement with an isopentyl group (compound 3) improved the binding affinity by 5-fold over compound 2, but compound 3 is still 8-fold less potent than compound 1. Replacement with a cyclopropyl ring (compound 4) resulted in a reduction of 15-fold over compound 1, but compound 4 is in fact 3-fold more potent than compound 2, suggesting that not only the size but also the shape of the hydrophobic groups are important for hydrophobic interactions. Replacement of the phenyl ring in compound 1 with a saturated cyclohexyl ring (compound 5) caused a moderate reduction of 4-fold, indicating that an aromatic ring appears to be more effective for hydrophobic interactions. Accordingly, two compounds with a 5-membered aromatic ring were synthesized (compounds 6 and 7 in Table 2). Both compounds 6 and 7 have binding affinities comparable to that of compound 1 and in fact both compounds appear to be slightly more potent than compound 1.

[0134] For effective hydrophobic interactions, the linker between the proline residue and the phenyl ring in compound 1 should have a proper length. Compounds 8 and 9 were designed to investigate the optimal length for the linker. While compound 8 is 16-fold less potent than compound 1, compound 9 is in fact 2-fold more potent than compound 1 with a K_i value of 0.22 μM.

[0135] The amino group of I4' in AVPI (**SEQ ID NO:1**) and of the benzylamine in compound 1 forms a hydrogen bond with the backbone carbonyl group of G306 (Figures 1 and 4). To probe the importance of this hydrogen bond for binding, compound 10 was synthesized in which the amide group in compound 1 is replaced by two carbon atoms. Compound 10 has a K_i value of 1.7 μM, which is 4-fold less potent than compound 1, indicating that the amide group only plays a modest role for the binding between compound 1 and XIAP.

[0136] In the experimental 3D complex structure (Figure 1), although the backbone carbonyl group of I4' points toward solvent, it was hypothesized that it may play a role to restrict the conformation of the hydrophobic side chain of I4' and place the hydrophobic group in an optimal orientation for effective hydrophobic interactions with XIAP. To test this idea, compound 11 was designed in which an additional phenyl ring was introduced. It was reasoned that although this additional phenyl group does not have specific interactions with the protein, it may enhance the binding affinity for the resultant compound through (a) restricting the second phenyl ring in an optimal orientation for effective hydrophobic interactions; and (b) reducing the conformational flexibility of the second phenyl ring as compared to compound 1. Compound 11 (SH-96) was determined to have a K_i value of 0.050 μM (50 nM), approximately 8-fold more potent than compound 1 and the natural Smac AVPI (SEQ ID NO:1) peptide, representing a highly potent Smac peptidomimetic.

[0137] Analysis of the Smac/XIAP BIR3 complex structures suggested that the methyl group in alanine interacts with a small but well-defined hydrophobic pocket in XIAP BIR3. Our analysis showed that this hydrophobic pocket appears to be large enough to accommodate a slightly larger hydrophobic group than a methyl group. To further probe this site, several Smac peptidomimetics were designed and synthesized (compounds 12-16 in Table 2).

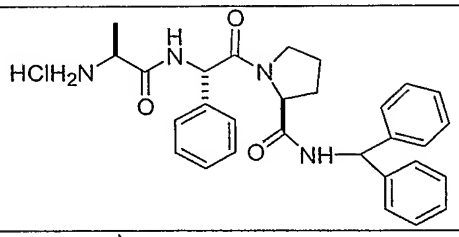
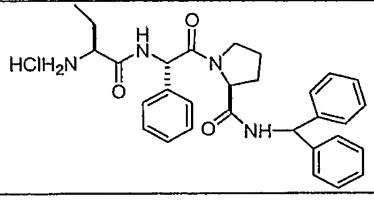
[0138] Replacement of the methyl group by a hydrogen atom in compound 9 resulted in compound 12, which has a K_i value of 95 μM, a reduction of >400-fold in binding affinity as compared to compound 9. Consistent with a previous study on Smac peptides (Kipp *et al.*, *Biochemistry 41*:7344 (2002)) and our modeling analysis, replacement of the methyl group by an ethyl group in

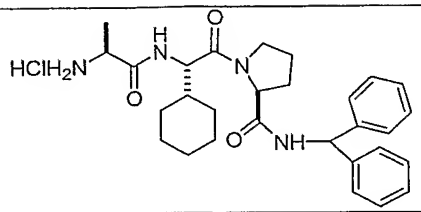
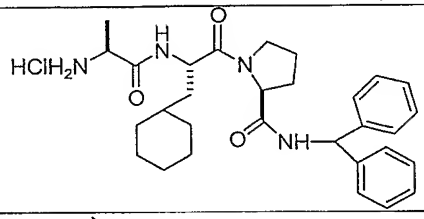
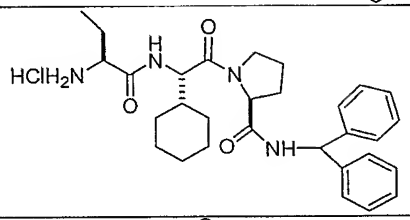
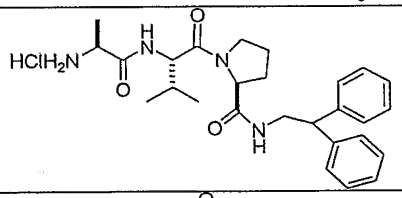
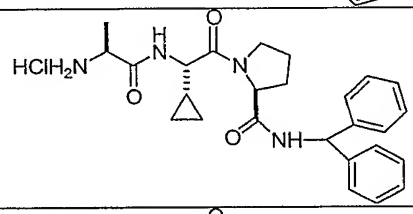
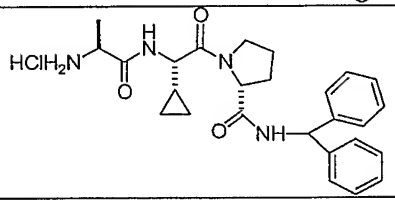
compound 1 improves the binding affinity by 3-fold (compound 13 vs. compound 1). Consistent with our modeling analysis that this hydrophobic pocket is quite small, replacement of the methyl group by an isopropyl or n-propyl group resulted in a reduction of >10- and >150-fold in binding affinity, respectively (compounds 14 and 15 vs. compound 1), indicating that this small hydrophobic pocket cannot accommodate an isopropyl or n-propyl group. These data indicate that a methyl and a slightly larger ethyl group are the two hydrophobic groups that most effectively interact with this small hydrophobic pocket in XIAP BIR3. Replacement of the methyl group with an ethyl group at this position in compound 11 resulted in compound 16, which has a K_i value of 0.044 μM (44 nM). Compound 16 is thus 10-fold more potent than compound 1 and 13-fold more potent than the natural Smac AVPI (SEQ ID NO:1) peptide. Taken together, the data for compounds 12-16 suggest that a methyl or an ethyl group are most effective for interacting with this small hydrophobic pocket.

[0139] Based on the success of the above-described compounds, several other Smac peptidomimetics have been designed, synthesized and tested in the FP-based binding assays. Results are shown in Tables 3 and 4.

[0140]

Table 3

Compound	Structure	K_i (μM) (±SD)
CJ-450		10.41 (±2.87)
CJ-444		13.52

CJ-451		0.67 (±0.07)
CJ-473		0.56
CJ-445		1.13
CJ-459		1.21 (±0.36)
CJ-464-1		0.35 (±0.04)
CJ-464-2		3.54 (±0.75)

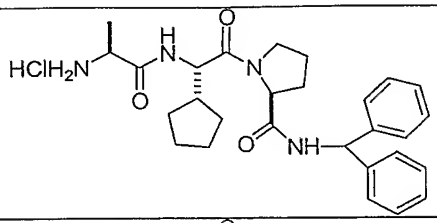
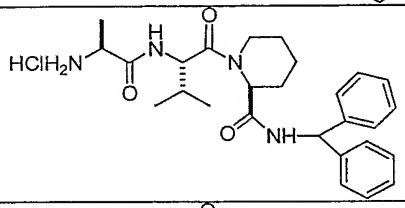
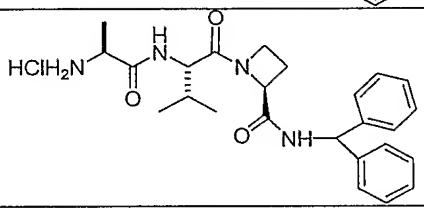
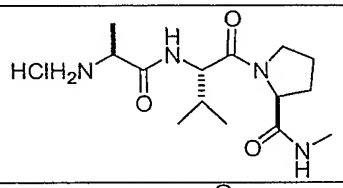
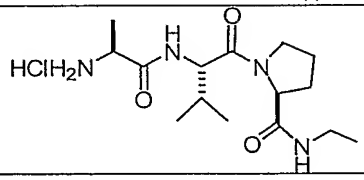
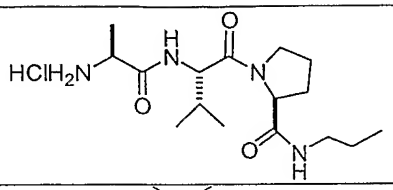
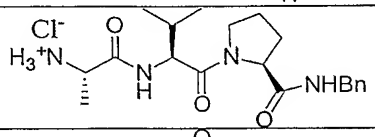
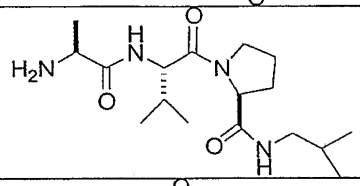
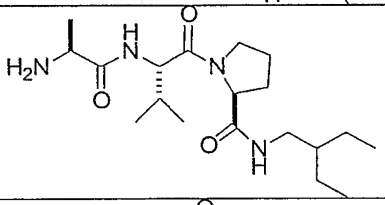
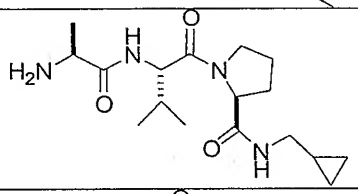
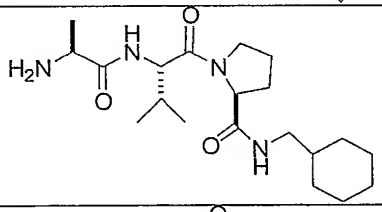
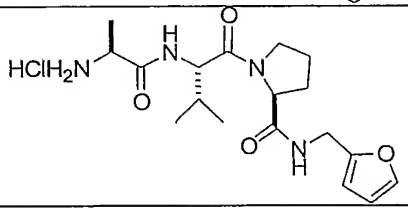
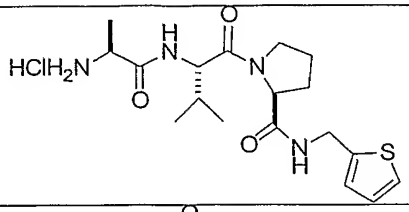
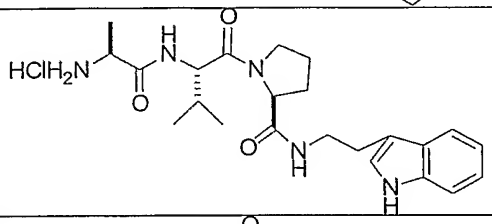
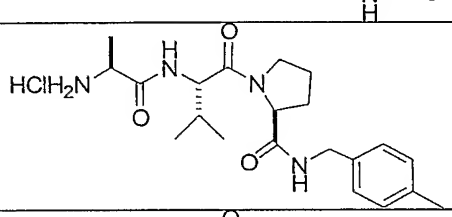
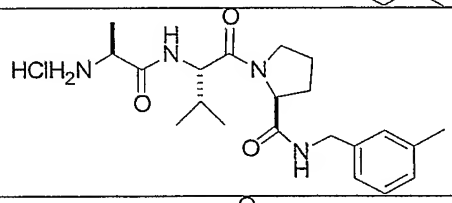
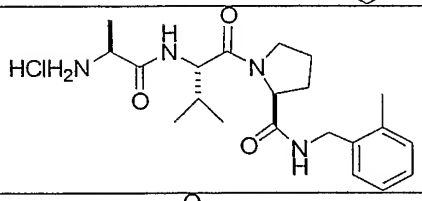
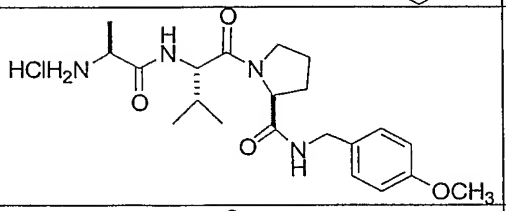
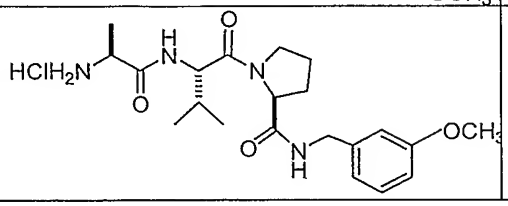
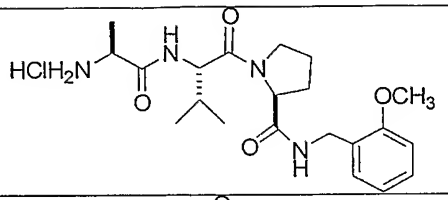
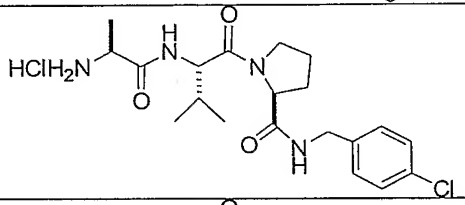
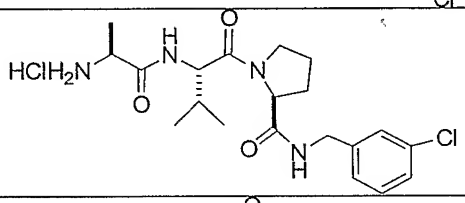
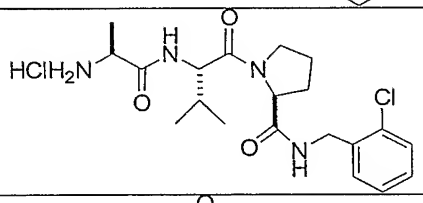
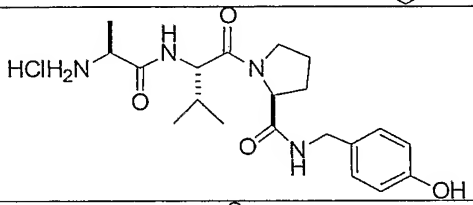
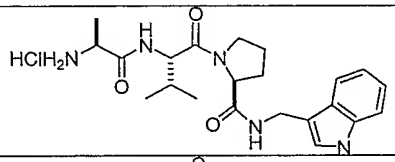
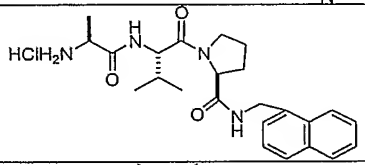
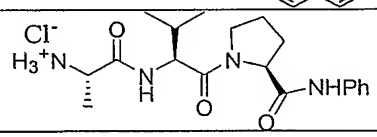
CJ-467		0.37 (±0.03)
CJ-458		159.7 (±7.50)
CJ-469		0.78 (±0.16)

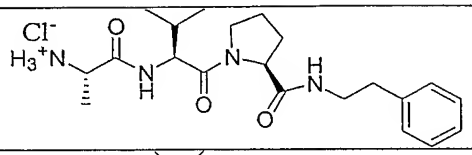
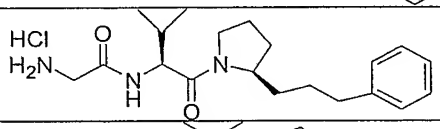
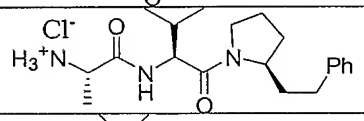
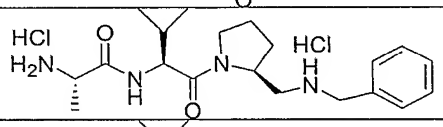
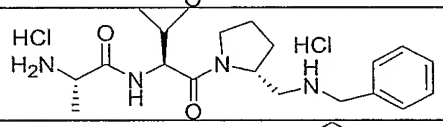
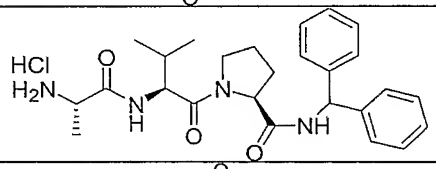
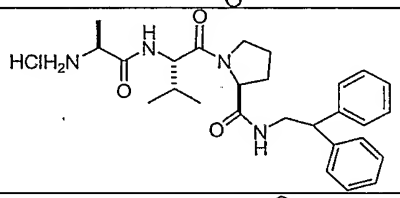
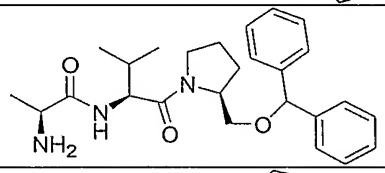
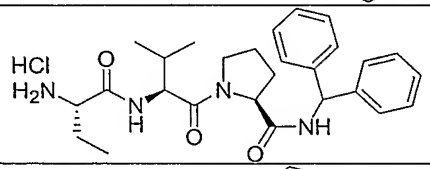
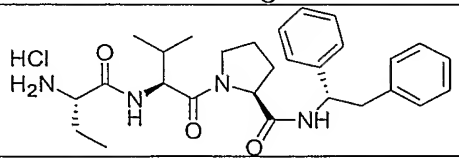
Table 4

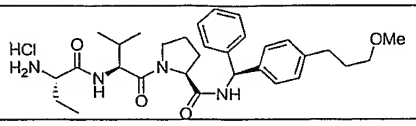
Compound	Structure	K_i (μM) (±SD)
CJ-452		80.89 (±3.08)
CJ-418		55.33 (±1.17)

CJ-453		49.17 (±3.75)
SH-65 (compound 1 in Table 2)		0.81 (±0.14)
CJ 374 (compound 2 in Table 2)		36.22 (±3.05)
CJ 375 (compound 3 in Table 2)		6.63 (±1.42)
CJ 373 (compound 4 in Table 2)		11.93 (±2.8)
CJ 372 (compound 5 in Table 2)		3.46 (±0.35)
CJ 362 (compound 6 in Table 2)		0.61 (±0.13)

CJ 367 (compound 7 in Table 2)		0.51 (±0.13)
CJ-376		3.99
CJ-409		3.21 (±0.46)
CJ-410		1.19 (±0.21)
CJ-411		0.54 (±0.18)
CJ-412		11.72
CJ-413		2.92

CJ-414		3.88
CJ-419		0.97
CJ-420		1.42
CJ-421		1.73
CJ-425		1.34
CJ-488		40.98
CJ-489		0.70
SH 90 (compound 8 in Table 2)		13.12 (±3.9)

SH 91 (compound 9 in Table 2)		0.43 (±0.17)
SH-82		3.22 (±0.72)
SH-64		> 200
SH-80		25.73
SH-81		> 200
SH 96 (compound 11 in Table 2)		0.096 (±0.03)
CJ-459		1.21 (±0.36)
SH-106		5.47
SH 97 (compound 16 in Table 2)		0.085 (±0.03)
SH-98		3.1

SH-103		0.100 (±0.03)

EXAMPLE 4

Expression of IAP Family Proteins in Cancer Cells and Normal Cells

[0141] To study the activity and specificity of the designed Smac peptidomimetics, Western blot analysis of XIAP, cIAP-1/2, survivin and Smac proteins was performed in several human cancer cell lines and normal cells (Figure 5).

[0142] The results show that human prostate cancer PC-3 cells have high levels of XIAP and cIAP-1/2 and a low level of survivin; human breast cancer MDA-MB-231 cells have a high level of cIAP-1, a medium level of XIAP, and low levels of cIAP-2 and survivin; and human prostate cancer DU-145 cells have a high level of XIAP and medium levels of cIAP-1/2 and survivin.

[0143] Normal human fibroblast WI-38 cells have low levels of XIAP, cIAP-1/2 and survivin; normal prostate epithelial cells (PrEC) have a detectable level of XIAP but much lower than PC-3 and DU-145 cells, a medium level of cIAP-1 and very low levels of cIAP-2 and survivin; and normal human breast epithelial cell lines MCF-10A and MCF-12A have detectable levels of XIAP but much lower than DU-145 and PC-3, have detectable levels of cIAP-1 but much lower than PC-3 and MDA-231, and very low levels of cIAP-2 and survivin.

[0144] Jurkat cells have low levels of XIAP and cIAP-2 and medium levels of cIAP-1 and survivin. As expected, Jurkat cells transfected with XIAP protein have a very high level of XIAP, while other IAP proteins are unchanged as compared to the parental cell line. The level of Smac protein appears to be the same among the cancer cells and normal cells examined here.

EXAMPLE 5

Smac Peptidomimetics Enhance Cisplatin-Induced Apoptosis in Prostate Cancer PC-3 Cells

[0145] Previous studies using short Smac peptides fused to a carrier peptide have convincingly demonstrated that cell-permeable Smac peptides were able to increase the apoptosis of cancer cells induced by a variety of chemotherapeutic agents in glioma, melanoma, breast, and non-small cell lung cancer cells (Fulda *et al.*, *Nature Med. 8*:808 (2002); Arnt *et al.*, *J. Biol. Chem. 277*:44236 (2002); Yang *et al.*, *Cancer Res. 63*:831 (2003)). Several characteristics were common among these studies. These cell-permeable Smac peptides by themselves have little effect in inducing apoptosis in cancer cells. A fairly high concentration of the peptides must be used (50-100 μM) in order to significantly potentiate the activity of chemotherapeutic drugs in apoptosis induction.

[0146] The basic premise of the present invention is that potent Smac peptidomimetics are more effective to increase apoptosis of cancer cells induced by chemotherapeutic drugs than Smac peptides linked to carrier molecules. The previous examples disclose quite potent Smac peptidomimetic compounds 11 and 16 (SH-97) with binding affinities at least 10-fold better than the Smac AVPI peptide (SEQ ID NO:1). Compound 16 (SH-97) was used to test the basic premise. For control compounds, a previously published cell-permeable Smac peptide (Smac8-C) (Arnt *et al.*, *J. Biol. Chem. 277*:44236 (2002)) was used as a positive control, Smac peptide (AVPIAQKS) (SEQ ID NO:6) without a carrier peptide was used as a negative control (Smac-8), and an inactive compound (SH-93) as another negative control. The experiment used PC-3 cells which express high levels of XIAP and cIAP-1/2 proteins and cisplatin (CDDP) as the chemotherapeutic drug. CDDP is a DNA damaging agent and can effectively induce apoptosis in PC-3 cells and is also a clinically used chemotherapeutic drug for prostate cancer.

[0147] PC-3 cells were treated with CDDP, Smac peptides and peptidomimetics alone or in combination for 42 hours and apoptosis was analyzed by Annexin V-FITC staining. Consistent with previous studies using cell-permeable Smac peptides, SH-97 up to 50 μM did not induce significantly more apoptosis as compared to untreated cancer cells, while 25 μM CDDP induced 12-15% of cancer cells to undergo apoptosis as compared to control cells (Figure 6A). Combination of 25 μM CDDP and 10 μM or 25 μM SH-97 induced 29.3% ± 1.9% and 35.8% ± 0.4% apoptosis over control cells, respectively (Figure 6A). Consistent with the published results that the cell-permeable Smac peptide increased apoptosis of chemotherapeutic drugs in a variety of cancer cells with high levels of IAP proteins, combination of 25 μM CDDP and 100 μM Smac8-C increased the apoptosis to 34% over control cells, while Smac8-C by itself had no significant effect (Figure 6B).

[0148] In a similar experiment, PC-3 cells were treated with the Smac peptidomimetic CJ-445 (Table 3) and CDDP as described above. Combination of 25 μM CDDP and 5 μM or 10 μM CJ-445 induced about 30% and about 35% apoptosis over control cells, respectively (Figure 7). 10 μM CJ-445 was as potent as 100 μM Smac8-C in sensitizing PC-3 cells to CDDP-induced apoptosis (Figure 7).

[0149] Another experiment was carried out in which MDA-231 breast cancer cells in 6-well plates were treated with SH-97 and CDDP, alone or in combination, for 42 hours. Cells were collected and stained with Annexin V-FITC and propidium iodide. The fluorescence of individual cells was analyzed by flow cytometry. 25 and 50 μM CDDP induced about 30% and about 45%, respectively, of cancer cells to undergo apoptosis as compared to control cells (Figure 8). Combination of 25 or 50 μM CDDP and 10 μM SH-97 induced about 50% and 90% apoptosis over control cells, respectively (Figure 8). 10 μM CJ-445 was as potent as 100 μM Smac8-C in sensitizing PC-3 cells to CDDP-induced apoptosis. (Figure 8).

[0150] Taken together, the results show that potent Smac peptidomimetics are effective to potentiate the activity of CDDP in inducing apoptosis in prostate

cancer and breast cancer cells. Additionally, the Smac peptidomimetics of the present invention appear to be more potent than the Smac peptide fused to a carrier peptide (Smac8-C) used in a previous study, while Smac peptide without the carrier peptide or an inactive Smac mimetic (SH-93) is unable to potentiate the activity of CDDP in inducing apoptosis in PC-3 cells.

EXAMPLE 6

SH-97 Sensitizes PC-3 Cells to X-ray Irradiation in a Clonogenic Assay

[0151] Overexpression of XIAP and other IAP proteins in cancer cells has been shown to inhibit apoptosis induced not only by chemotherapeutic agents but also by radiation (Holcik *et al.*, *Oncogene 19*:4174 (2000)). Therefore, it was predicted that treatment of PC-3 cells with a potent and cell-permeable Smac mimetic such as SH-97 will sensitize PC-3 cells to X-ray radiation by directly overcoming the protective effects of IAP proteins to cancer cells.

[0152] To test this prediction, PC-3 cells were treated in 6-well plates with SH-97 and X-ray radiation alone and in combination using a standard clonogenic assay. The cell-permeable Smac peptide (Smac8-C) was again used as the positive control. After 10 days of culture, the plates were stained with crystal violet and the colonies with over 50 cells were counted with a ColCount colony counter. The cell survival curves were plotted with linear-quadratic curve fitting (Figure 9). Consistent with the apoptosis experiments, SH-97 or Smac8-C by itself had no significant effect. Treatment of PC-3 cells with 10 and 25 μM of SH-97 or with 100 μM of Smac8-C significantly increased the activity of the radiation. As can be seen, at 6 Gy dose of radiation, 10 and 25 μM of SH-97 resulted in more than 10-fold reduction of colony formation as compared to radiation alone. At 8 Gy of radiation, 10 and 25 μM of SH-97 resulted in 40- and 50-fold reduction of colony formation as compared to radiation alone. Consistent with results obtained from the above mentioned combination experiment of SH-97 with CDDP, 10 μM SH-97 also appears to be more effective than 100 μM of the cell-permeable Smac peptide

Smac8-C at both 6 and 8 Gy radiation doses. Hence, the results on SH-97 in both apoptosis and colony formation experiments provide evidence to support the basic premise that potent cell-permeable peptidomimetics are more effective than cell-permeable Smac peptides to overcome apoptosis resistance of cancer cells with high levels of XIAP and other IAP proteins to chemotherapeutic drugs and radiation.

EXAMPLE 7

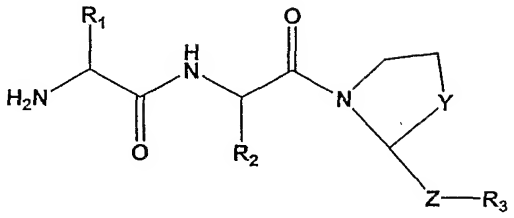
Smac Peptidomimetics Induce Apoptosis in Cancer Cells

[0153] To test the effect of Smac peptidomimetics by themselves on induction of apoptosis in cancer cells, several peptidomimetics were administered to the MDA-231 breast cancer cell line. 2000 cells were seeded in 96-well plates with increasing concentrations of SH-96, SH-97, CJ-444, CJ-445, CJ-450, and CJ-451. The cells were then incubated at 37 C with 5% CO_2 for 5 days, followed by detection of cell viability with the MTT assay. Untreated cells were used as 100% growth. Each of the Smac peptidomimetics inhibited the growth of the MDA-231 cells, with an EC_{50} in the range of about 120-130 μM (Figure 10). In a similar experiment, PC-3 cells were treated with CJ-444, CJ-445, CJ-450, and CJ-451. Again, each of the Smac peptidomimetics inhibited the growth of the PC-3 cells, with an EC_{50} in the range of about 120-130 μM (Figure 11). These data indicate that Smac peptidomimetics are capable of inducing apoptosis in cancer cells, as well as sensitizing cells to inducers of apoptosis.

[0154] Having now fully described the invention, it will be understood by those of skill in the art that the same can be performed within a wide and equivalent range of conditions, formulations, and other parameters without affecting the scope of the invention or any embodiment thereof. All patents, patent applications and publications cited herein are fully incorporated by reference herein in their entirety.

WHAT IS CLAIMED IS:

1. A compound having Formula I:



I

or a pharmaceutically acceptable salt or prodrug thereof, wherein:

R_1 is C_{1-2} alkyl or C_{1-2} haloalkyl;

R_2 is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl;

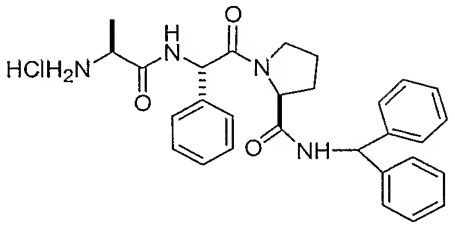
R_3 is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl;

Y is $(CH_2)_{0-3}$, wherein one or more carbon can be replaced by one or more heteroatoms selected from oxygen, sulfur, and nitrogen, and one or more hydrogens in CH_2 groups can be replaced by a branched or unbranched alkyl or cyclic alkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl; and

Z is CONH, CH_2O, NHCO, $(CH_2)_{1-4}$, $(CH_2)_{1-3}CONH(CH_2)_{0-3}$, $(CH_2)_{1-3}S(CH_2)_{0-3}$, $(CH_2)_{1-3}NH(CH_2)_{0-3}$, $(CH_2)_{1-3}NHCO(CH_2)_{0-3}$, $(CH_2)_{1-3}NHSO_2(CH_2)_{0-3}$, $(CH_2)_{1-3}NHC(O)NH(CH_2)_{0-3}$, $(CH_2)_{1-3}NHC(S)NH(CH_2)_{0-3}$, or $(CH_2)_{1-3}NR'(CH_2)_{0-3}$, wherein R' is branched or unbranched alkyl or cycloalkyl or substituted or unsubstituted aryl, alkylaryl, heteroaryl, or alkylheteroaryl.

2. The compound of claim 1, wherein Z is CONH.

3. The compound of claim 1, wherein said compound is selected from the group consisting of:



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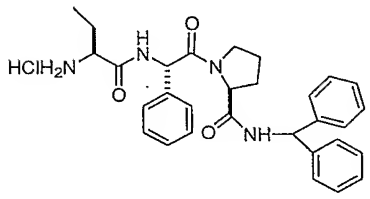

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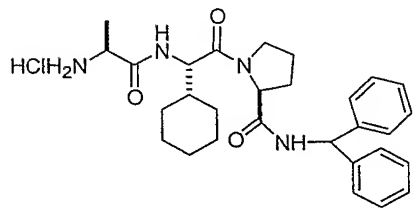

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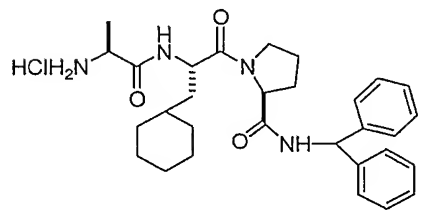

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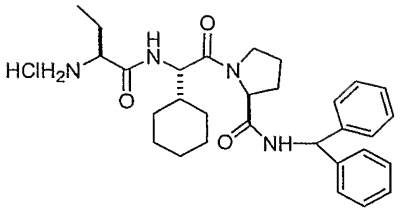
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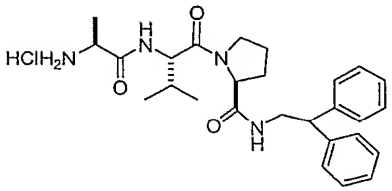
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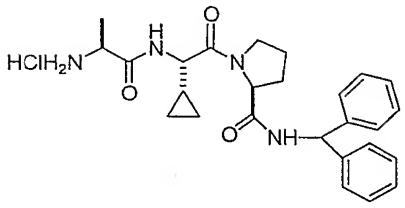
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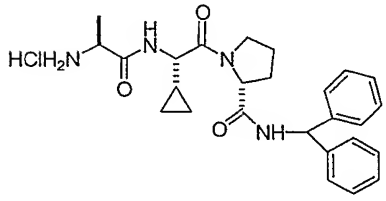
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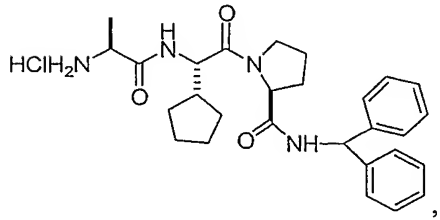
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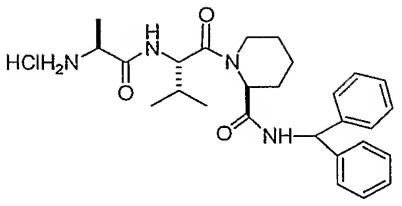
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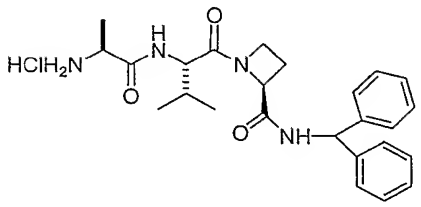
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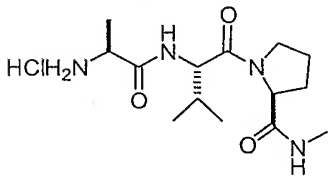
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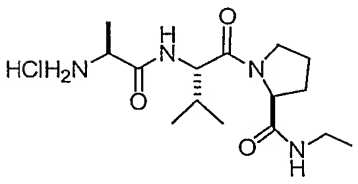
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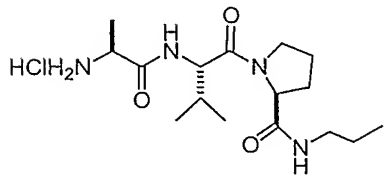
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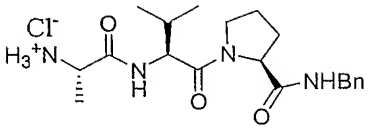
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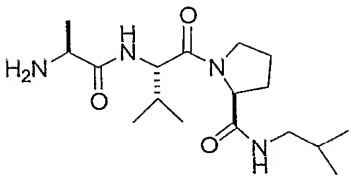
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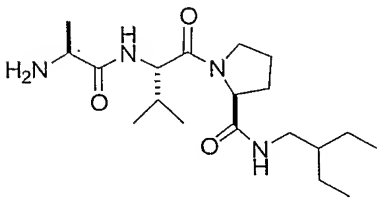
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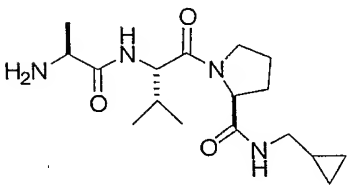
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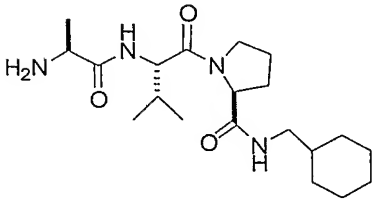
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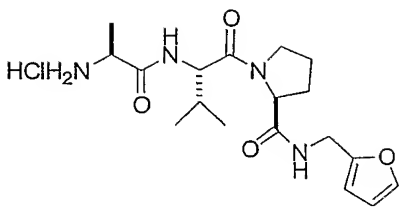
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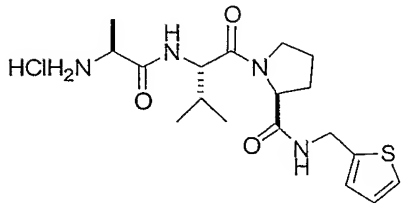
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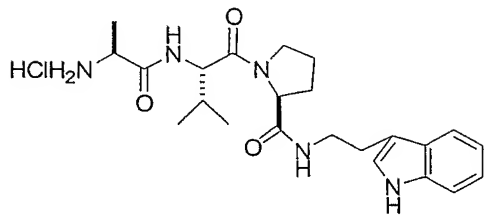
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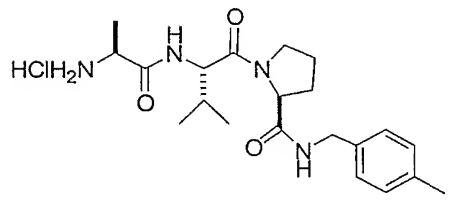
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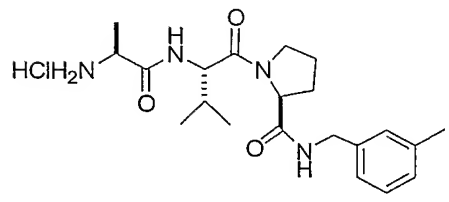
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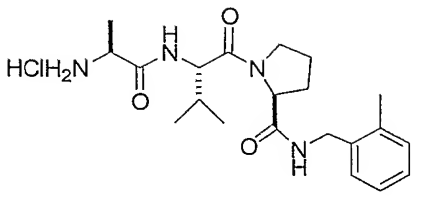

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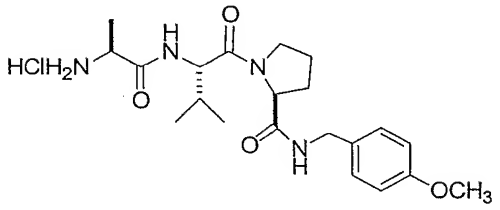

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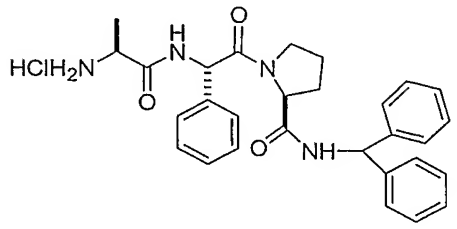
4. A pharmaceutical composition comprising a compound of claim 1 and a pharmaceutically acceptable carrier.

5. The pharmaceutical composition of claim 4, wherein Z is CONH.

6. The pharmaceutical composition of claim 4, wherein said compound is selected from the group consisting of:



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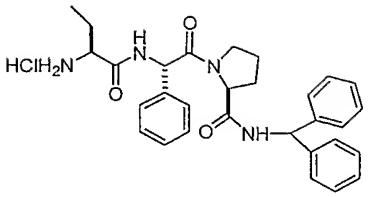
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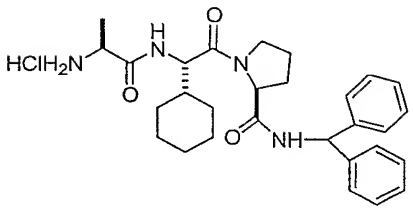
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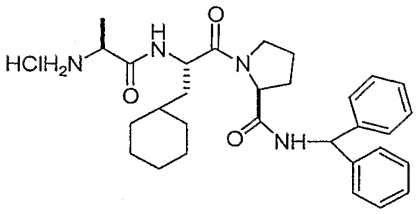
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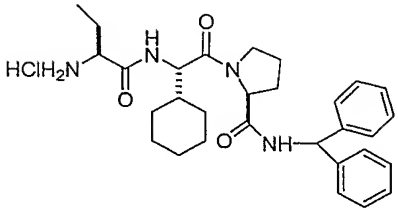
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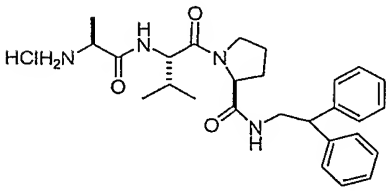
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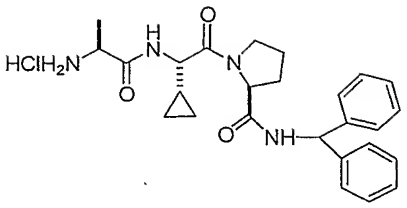

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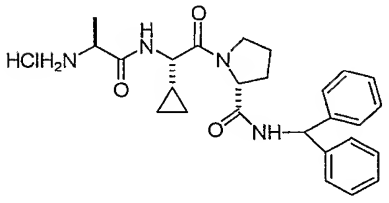

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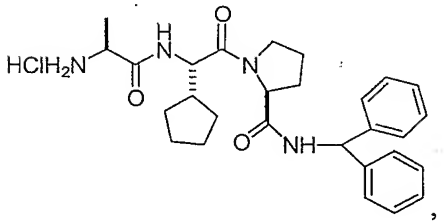

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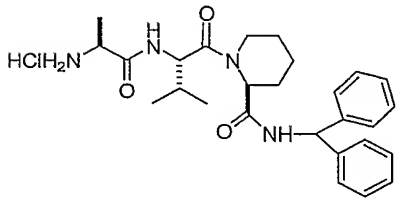

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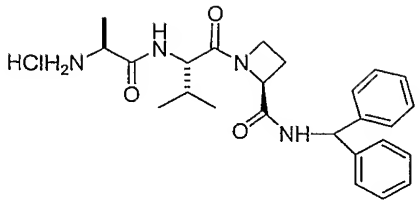
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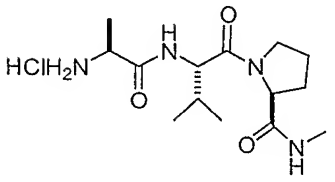
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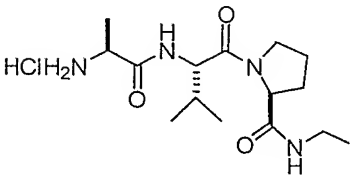
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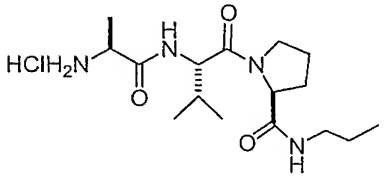
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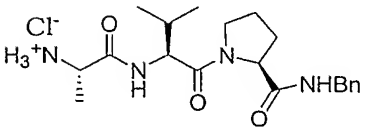
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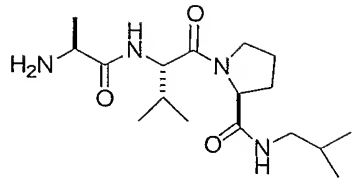
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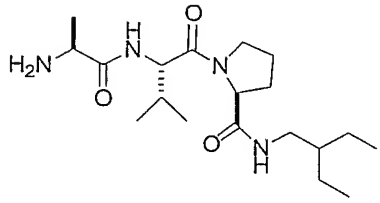
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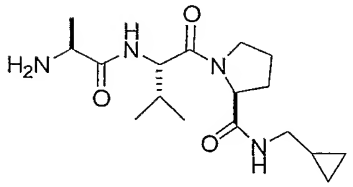
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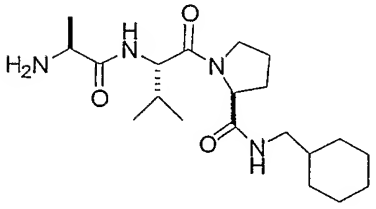
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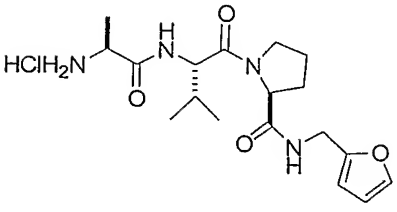
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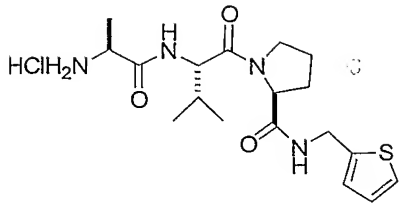
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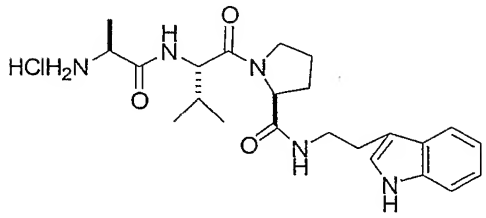
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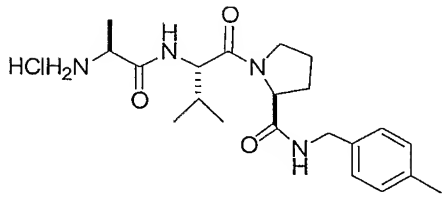
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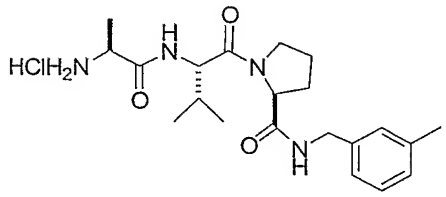
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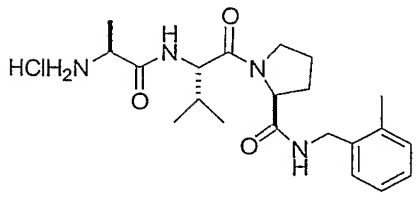
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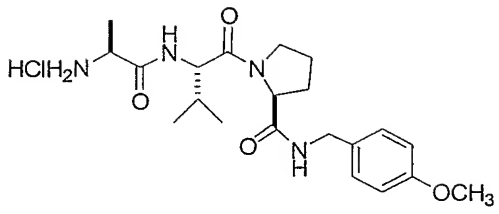
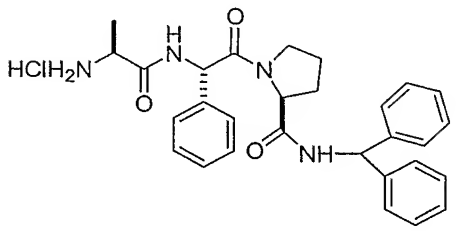


7. A method of inducing apoptosis in a cell comprising contacting the cell with a compound of claim 1.

8. The method of claim 7, wherein Z is CONH.

9. The method of claim 7, wherein said compound is selected from the group consisting of:



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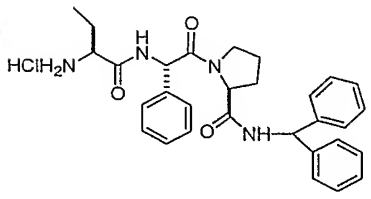

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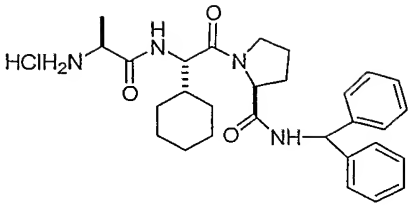
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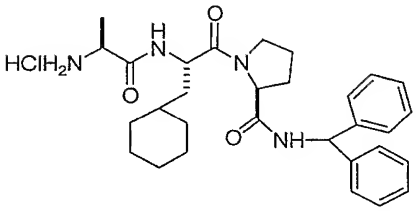
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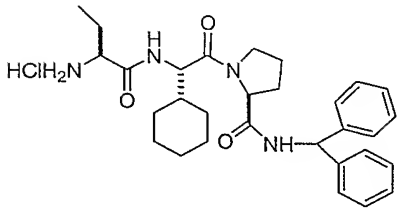
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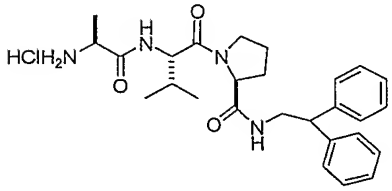
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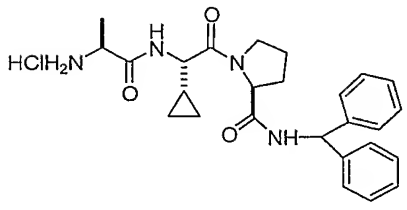
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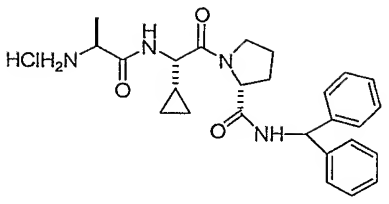

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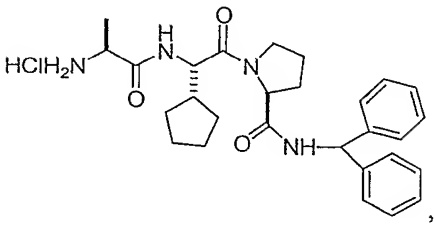

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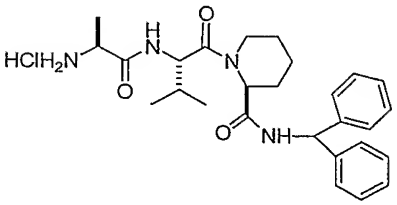

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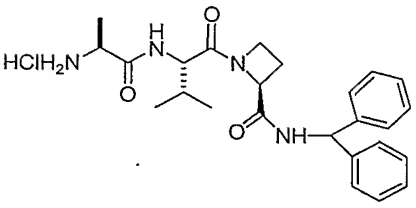

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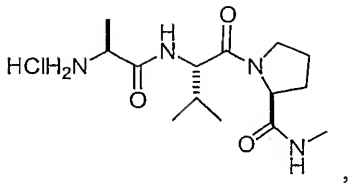
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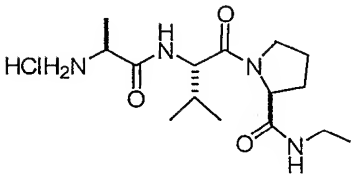
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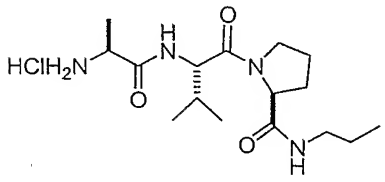
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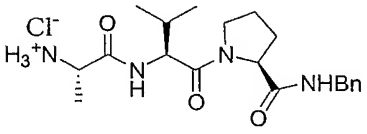
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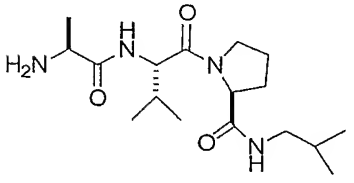
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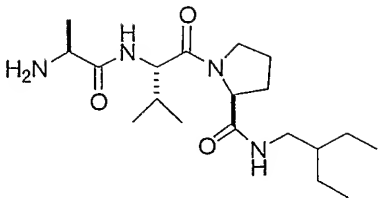
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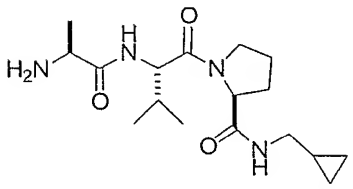
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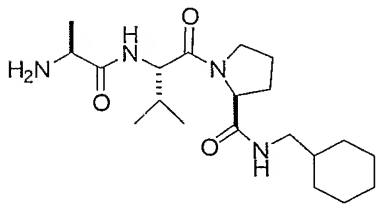
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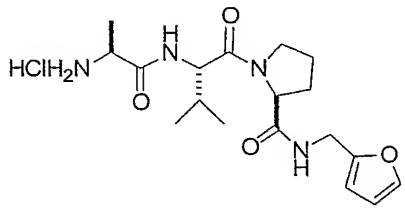
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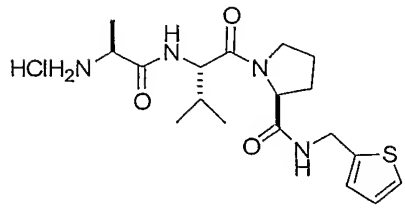
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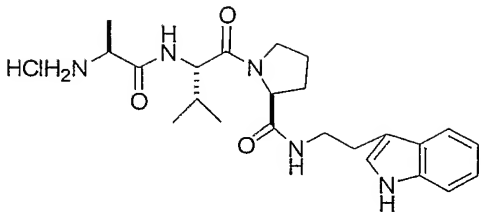
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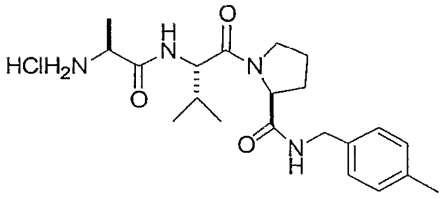
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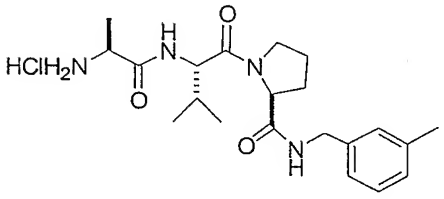
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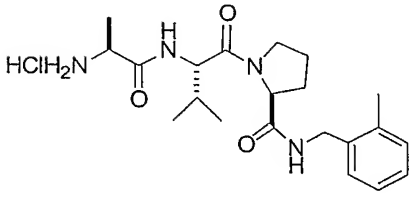
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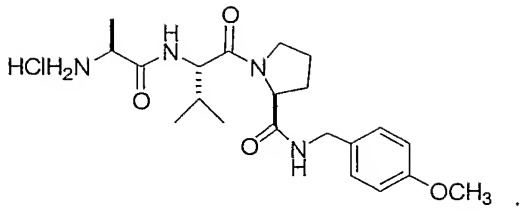


10. A method of rendering a cell sensitive to an inducer of apoptosis comprising contacting the cell with a compound of claim 1.

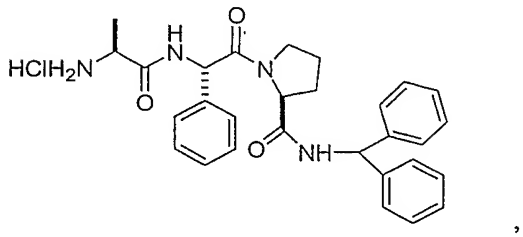
11. The method of claim 10, further comprising contacting the cell with an inducer of apoptosis.

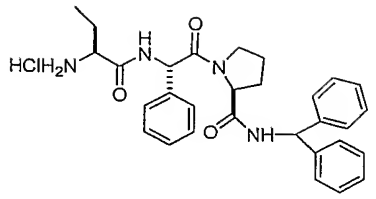
12. The method of claim 11, wherein said inducer of apoptosis is a chemotherapeutic agent.

13. The method of claim 11, wherein said inducer of apoptosis is radiation.

14. The method of claim 10, wherein Z is CONH.

15. The method of claim 10, wherein said compound is selected from the group consisting of:

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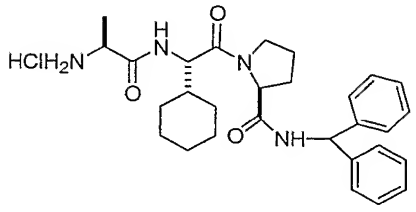
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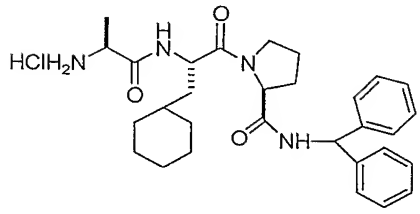
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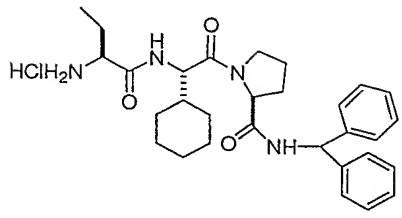
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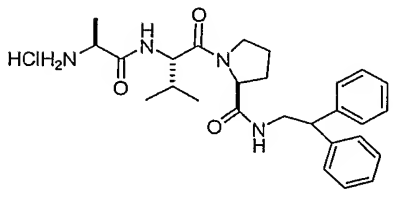
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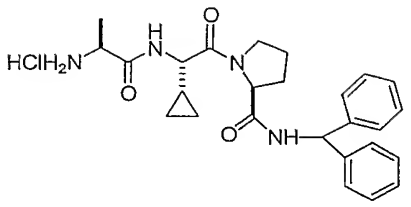
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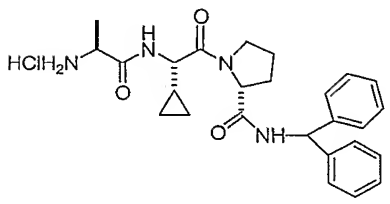
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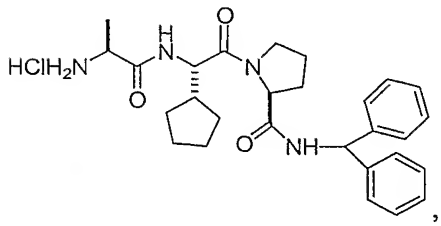
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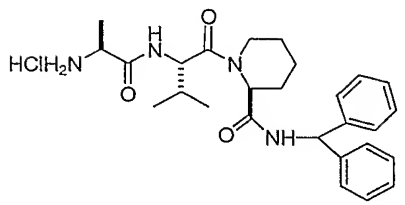
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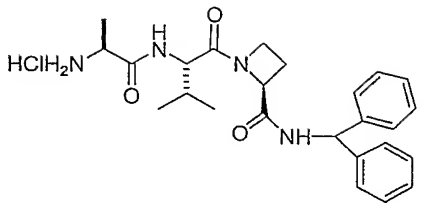
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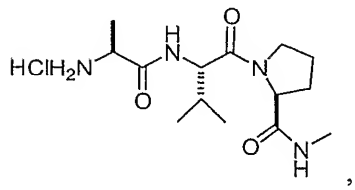
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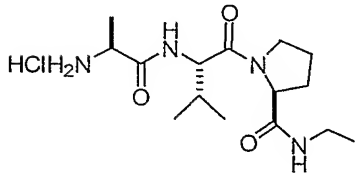
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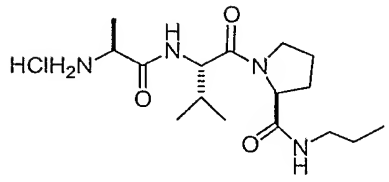
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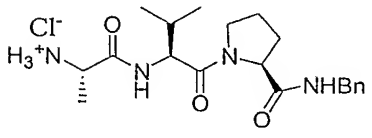
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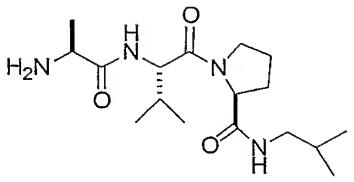
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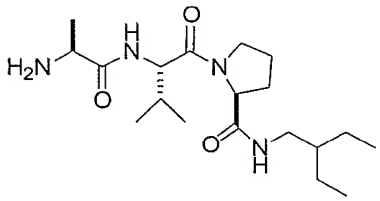
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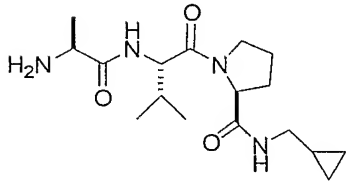
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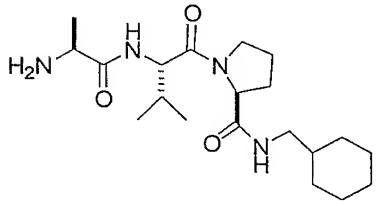
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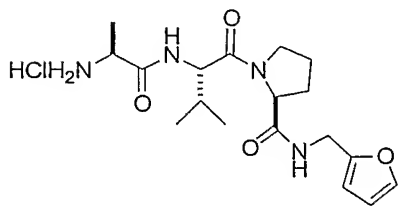
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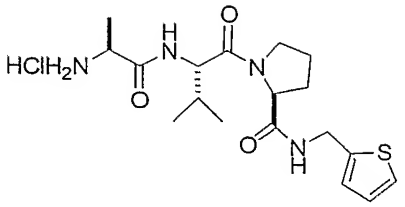
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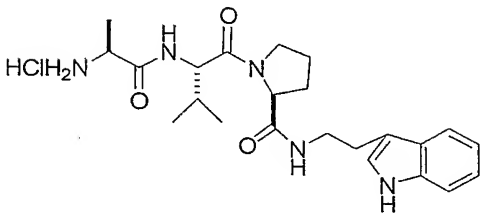
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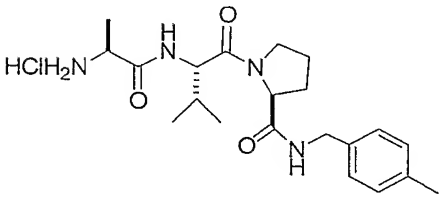
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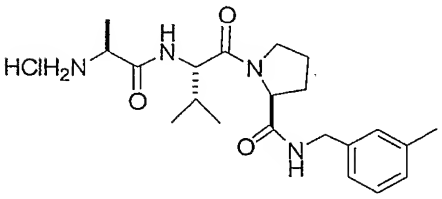
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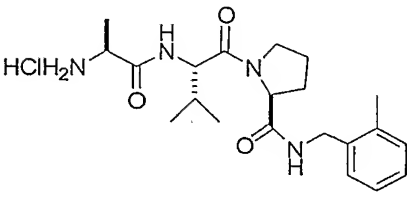
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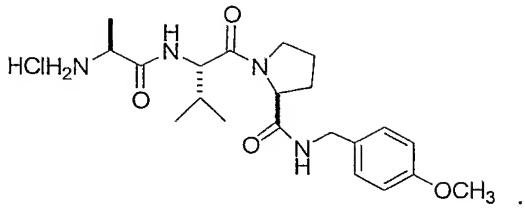


16. A method of treating, ameliorating, or preventing a disorder responsive to the induction of apoptosis in an animal, comprising administering to said animal a therapeutically effective amount of a compound of claim 1 and an inducer of apoptosis.

17. The method of claim 16, wherein said inducer of apoptosis is a chemotherapeutic agent.

18. The method of claim 16, wherein said inducer of apoptosis is radiation.

19. The method of claim 16, wherein said disorder responsive to the induction of apoptosis is a hyperproliferative disease.

20. The method of claim 19, wherein said hyperproliferative disease is cancer.

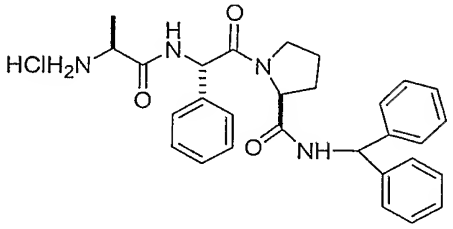
21. The method of claim 16, wherein said compound of claim 1 is administered prior to said inducer of apoptosis.

22. The method of claim 16, wherein said compound of claim 1 is administered concurrently with said inducer of apoptosis.

23. The method of claim 16, wherein said compound of claim 1 is administered after said inducer of apoptosis.

24. The method of claim 16, wherein Z is CONH.

25. The method of claim 16, wherein the compound is selected from the group consisting of:



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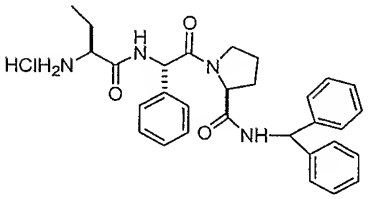

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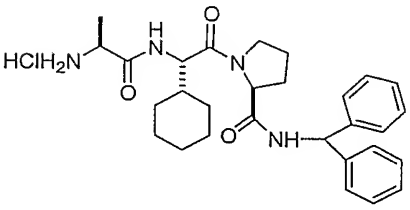

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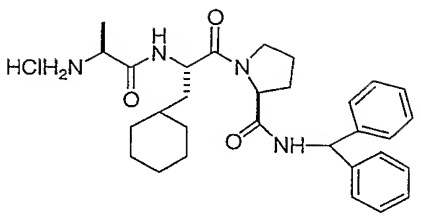
HClH2N
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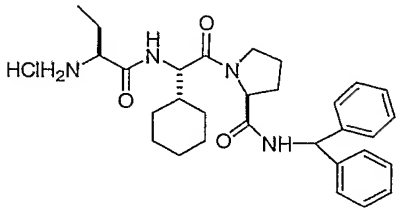
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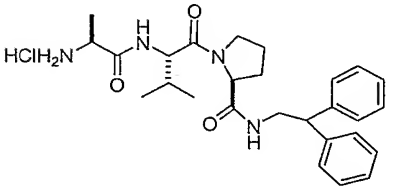
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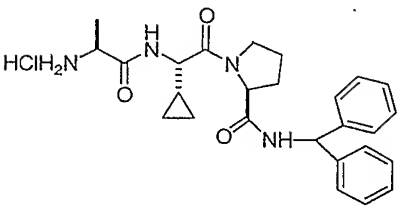
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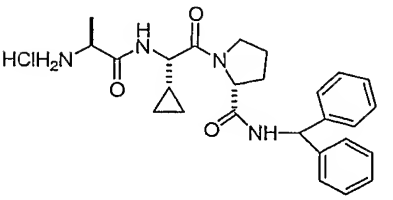
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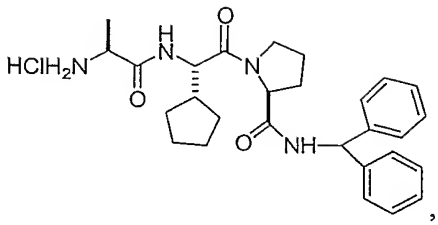
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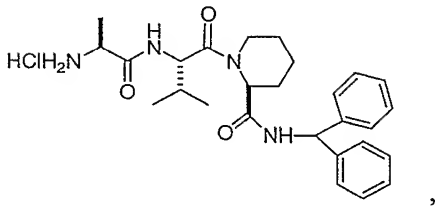
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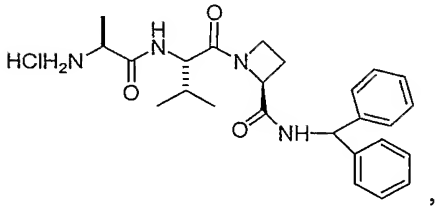
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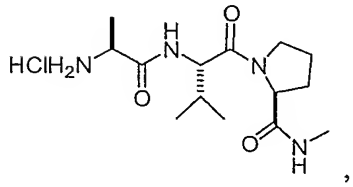
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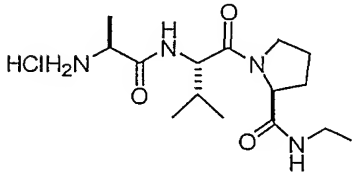
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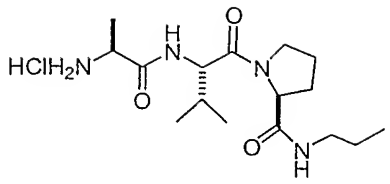

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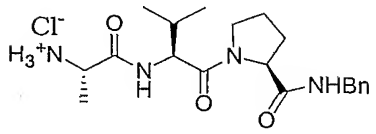

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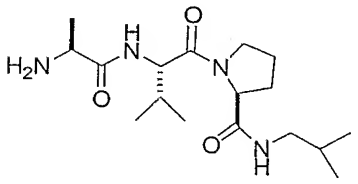

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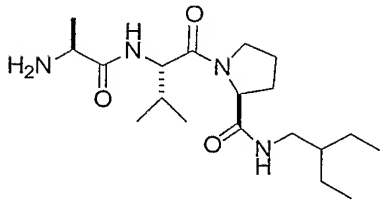

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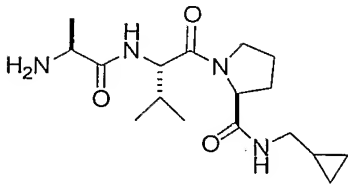

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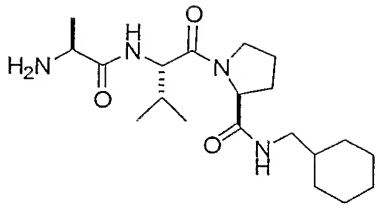
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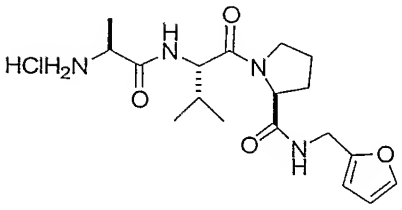
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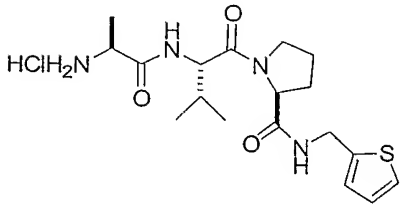
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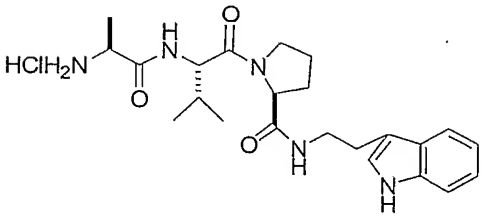
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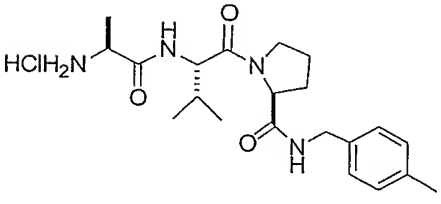
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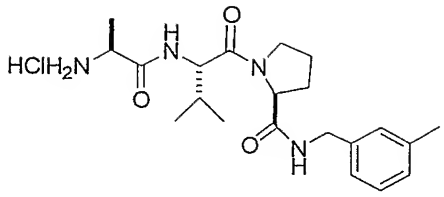

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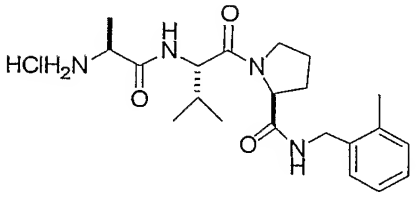

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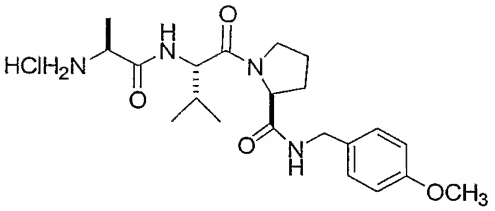

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26. A kit comprising a compound of claim 1 and instructions for administering said compound to an animal.

27. The kit of claim 26, further comprising an inducer of apoptosis.

28. The kit of claim 27, wherein said inducer of apoptosis is a chemotherapeutic agent.

29. The kit of claim 26, wherein said instructions are for administering said compound to an animal having a hyperproliferative disease.

30. The kit of claim 29, wherein said hyperproliferative disease is cancer.

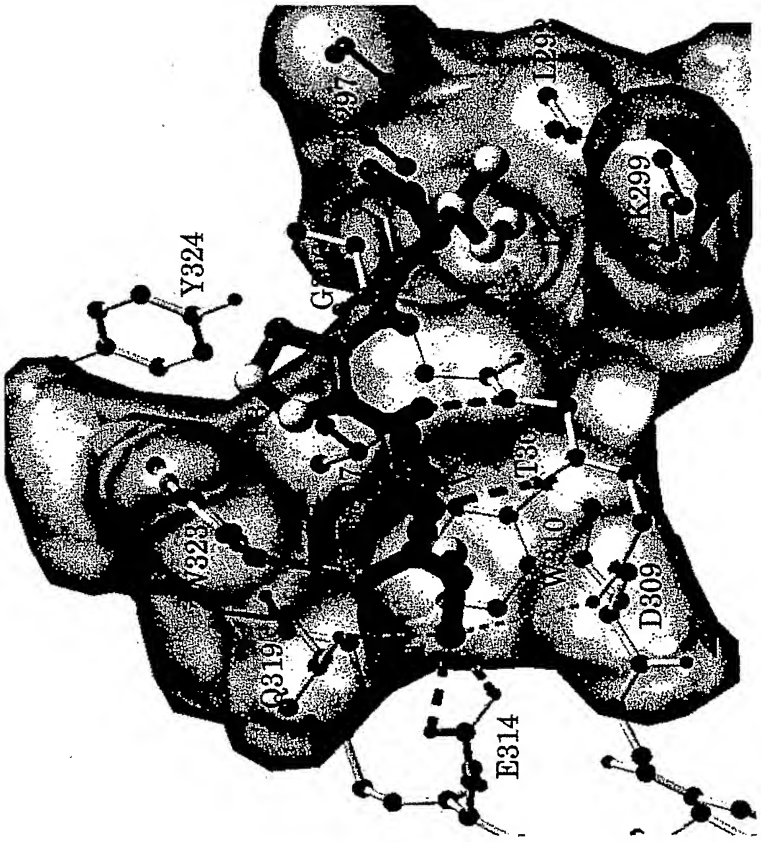


FIG. 1

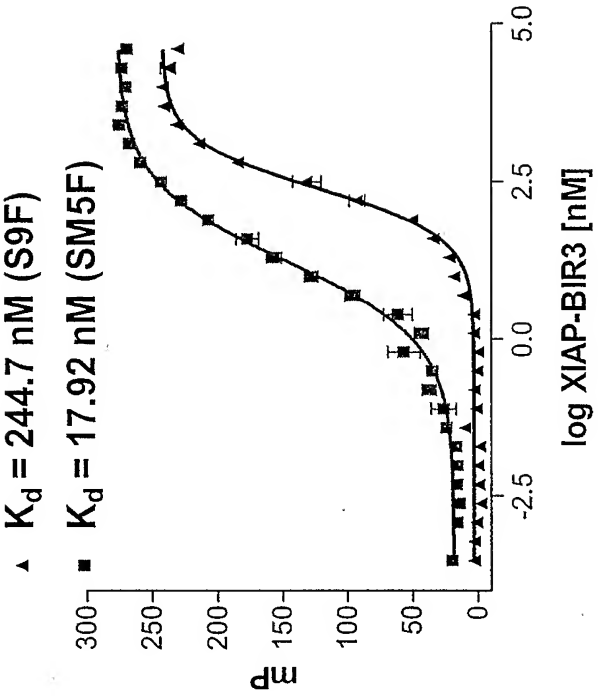

▲ K_d = 244.7 nM (S9F)
■ K_d = 17.92 nM (SM5F)
mP
300
250
200
150
100
50
0
-2.5
0.0
2.5
5.0
log XIAP-BIR3 [nM]

FIG. 2

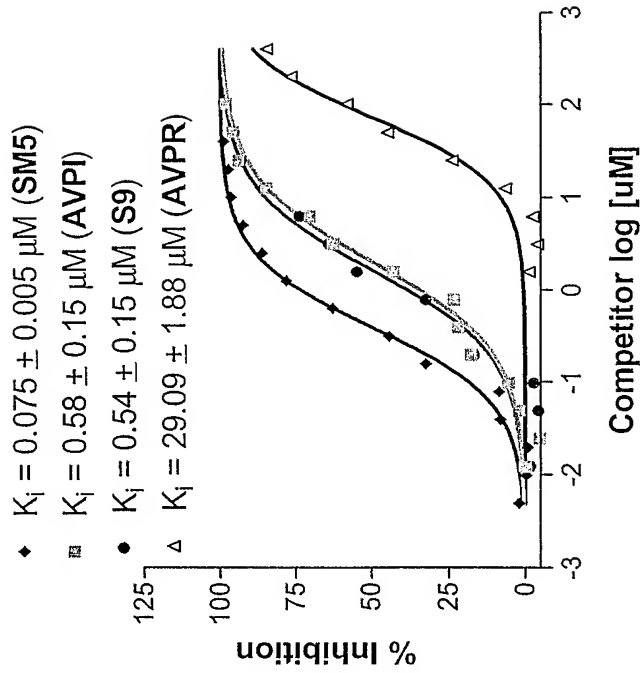

◆ K_i = 0.075 ± 0.005 µM (SM5)
■ K_i = 0.58 ± 0.15 µM (AVPI)
● K_i = 0.54 ± 0.15 µM (S9)
△ K_i = 29.09 ± 1.88 µM (AVPR)
% Inhibition
125
100
75
50
25
0
-3
-2
-1
0
1
2
3
Competitor log [uM]

FIG. 3

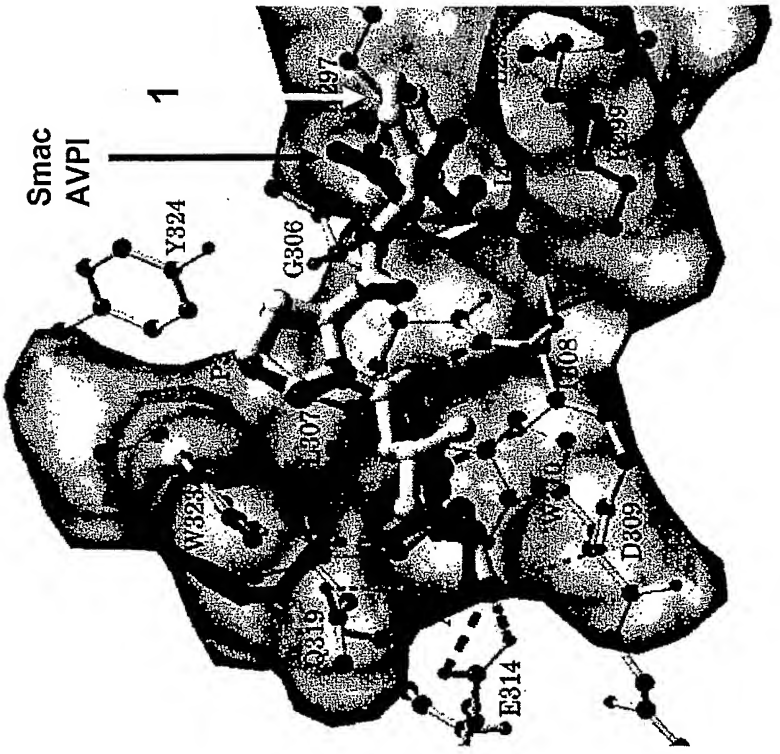


FIG. 4

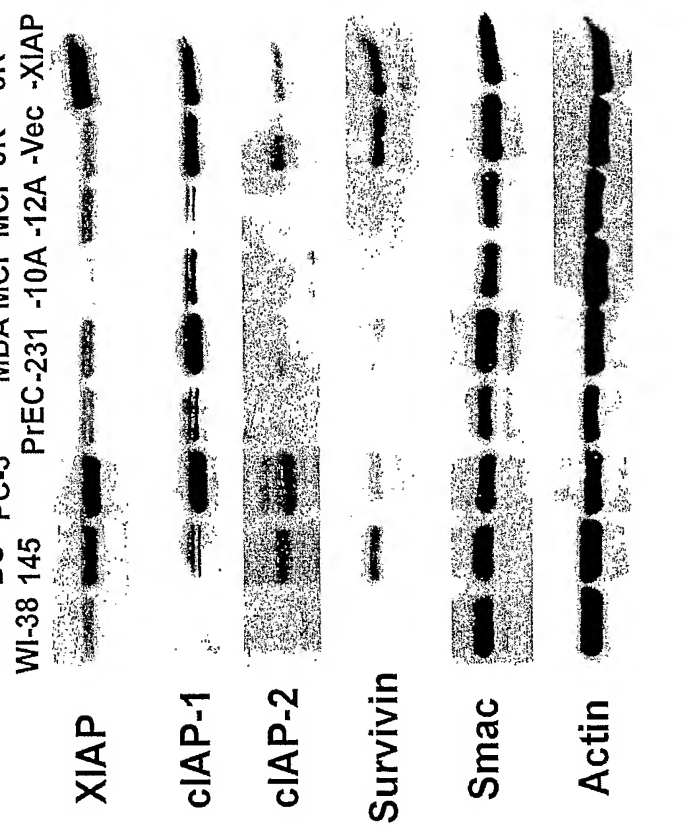

WI-38
DU-145
PC-3
PrEC
MDA-231
MCF-10A
MCF-12A
JK-Vec
JK-XIAP
XIAP
cIAP-1
cIAP-2
Survivin
Smac
Actin

FIG. 5

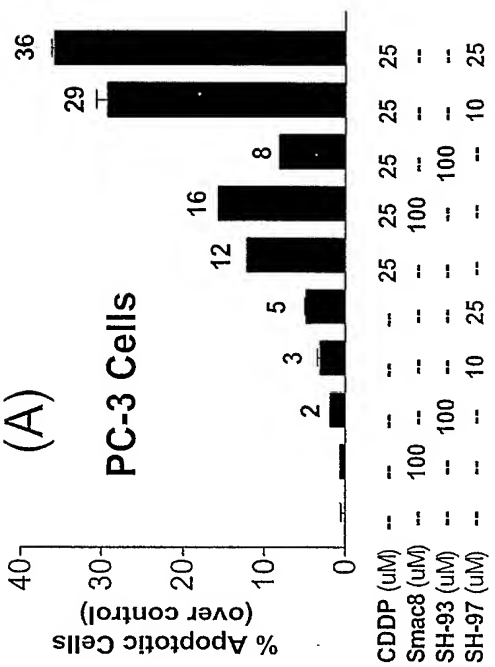

(A)
PC-3 Cells
% Apoptotic Cells
(over control)
0
10
20
30
40
2
3
5
12
16
8
29
36
CDDP (uM) -- -- -- -- -- 25 25 25 -- -- -- 25
Smac8 (uM) -- 100 -- -- -- -- -- 100 -- -- -- --
SH-93 (uM) -- -- 100 -- -- -- -- -- 100 -- -- --
SH-97 (uM) -- -- -- 10 25 -- -- -- -- 10 25

FIG. 6A

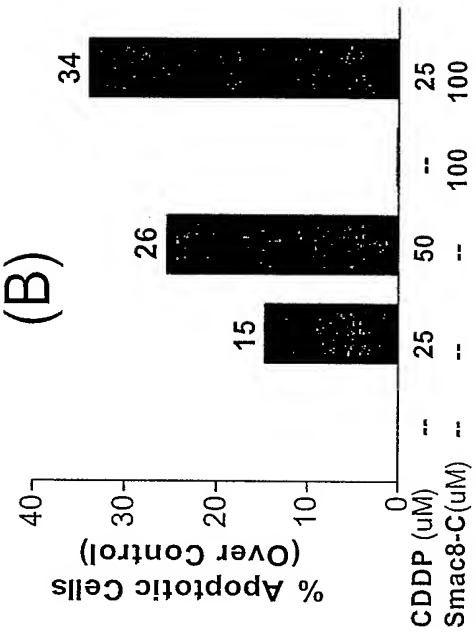

(B)
% Apoptotic Cells
(Over Control)
0
10
20
30
40
15
26
34
CDDP (uM) -- 25 -- 50 -- 100
Smac8-C(uM) -- -- 25 -- 100

FIG. 6B

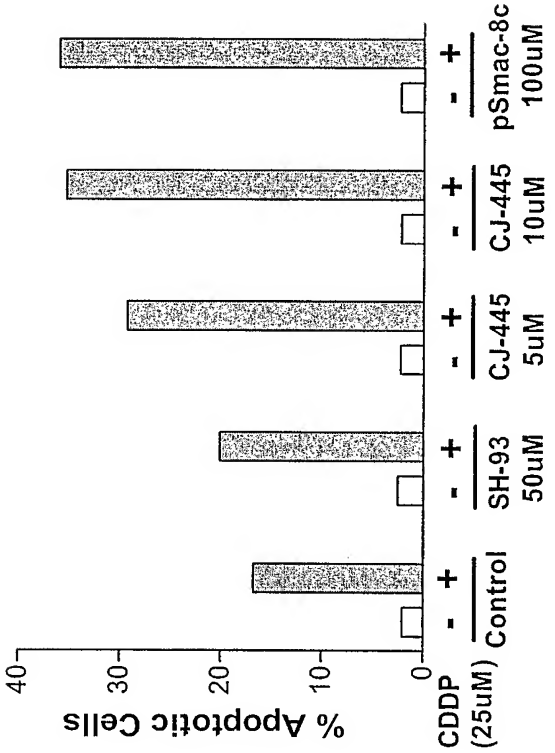

% Apoptotic Cells
0
10
20
30
40
CDDP (25uM)
- +
Control
- +
SH-93 50uM
- +
CJ-445 5uM
- +
CJ-445 10uM
- +
pSmac-8c 100uM

FIG. 7

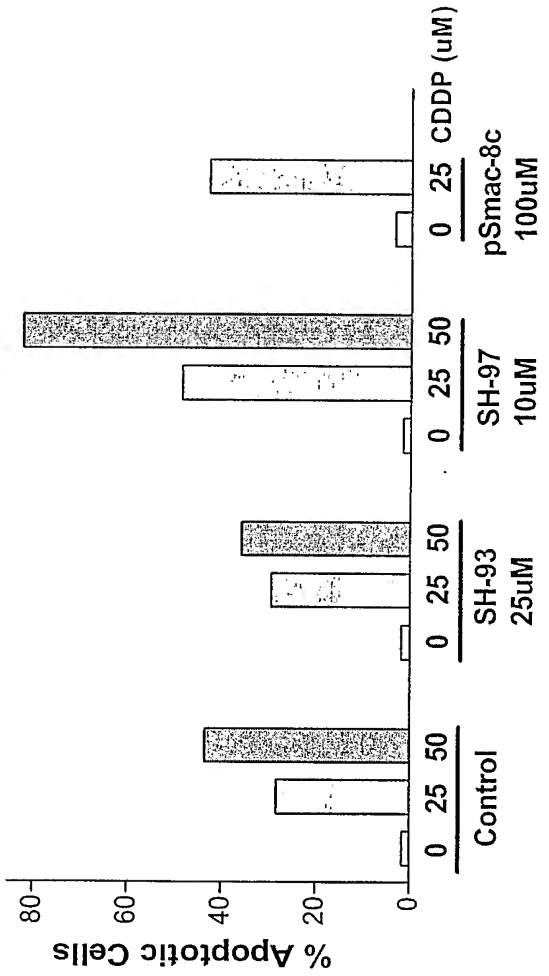

% Apoptotic Cells
0
20
40
60
80
Control
SH-93
25uM
SH-97
10uM
pSmac-8c
100uM
0 25 50
CDDP (uM)

FIG. 8

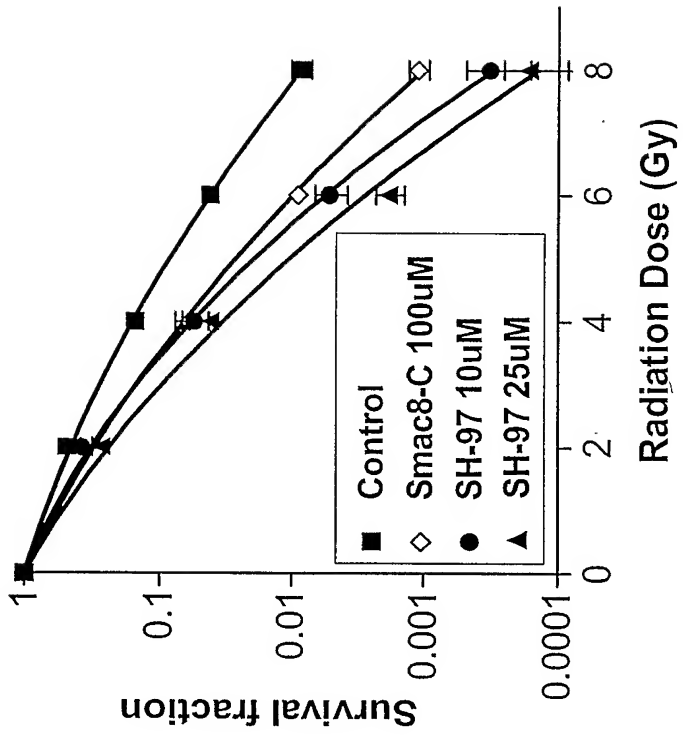
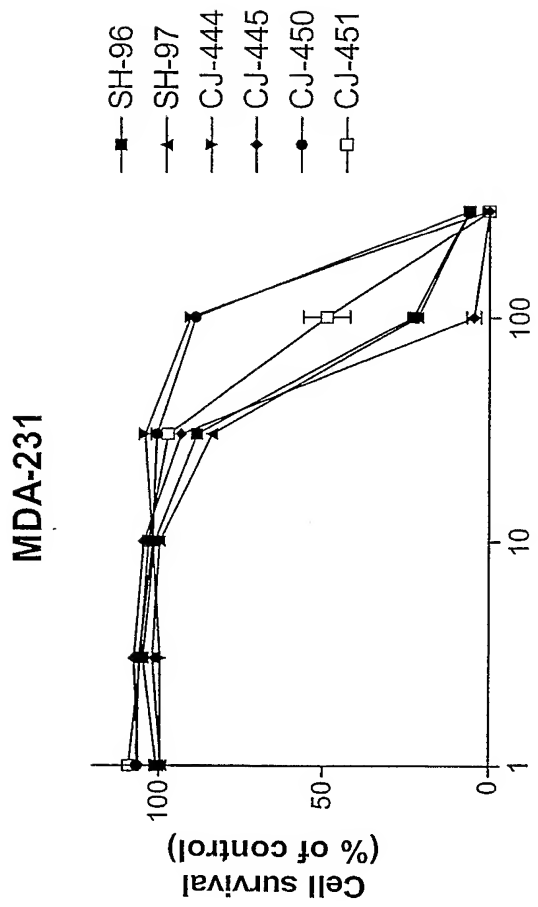
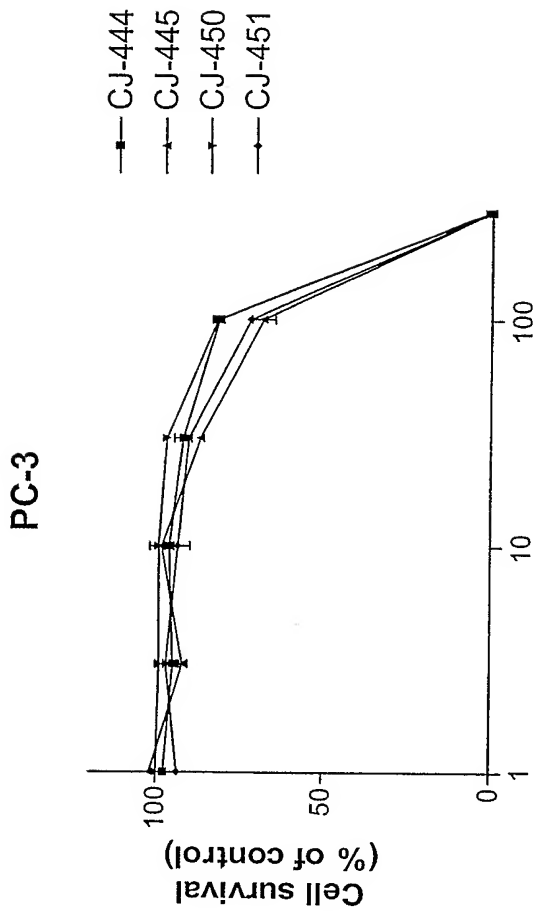

Survival fraction
1
0.1
0.01
0.001
0.0001
0
2
4
6
8
Radiation Dose (Gy)
Control
Smac8-C 100uM
SH-97 10uM
SH-97 25uM

FIG. 9



	SH-96	SH-97	CJ-444	CJ-445	CJ-450	CJ-451
EC50	64.46	59.51	139.0	52.75	161.1	98.71

FIG. 10



	CJ-444	CJ-445	CJ-450	CJ-451
EC50	126.7	119.6	131.5	120.5

FIG. 11